if you feel...
change is possible

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a report
by the
senior citizen's
commission
january 1974

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JUL 19 1974

January 31, 1974.

Honourable Alex Taylor,
Minister of Social Services,
2240 Albert Street,
REGINA, Saskatchewan.

Dear Sir:

Since our appointment in February, 1973, as members of the Senior Citizen's Commission, we have considered it a privilege to serve the people of Saskatchewan.

The field of Senior Citizen's concerns is overwhelming. Therefore, to assist us in our work, it became necessary to decide on certain priorities. It became abundantly clear shortly after our travels began, that we had taken the right direction. Now, at the completion of our study, we are thoroughly convinced that we are reflecting the voice of the people in this Province. We believe the recommendation will provide a vehicle that will allow the elderly to regain their lost position in the mainstream of society.

It is our conviction, that with time, the proposed Agency will undoubtedly become part of new, broader human service systems in this Province. This Agency can and will lay the necessary cornerstones for proper building in the future.

We began as a nine-member Commission in February. An original member, Mr. Joseph Thain, resigned in March, 1973, and Mr. Jim Alexander was appointed in his place. Mr. Randy Wallace was an original member of our Commission until March, 1973, at which time he began to work with the Provincial Government. Our work and study continued with an eight-member Commission.

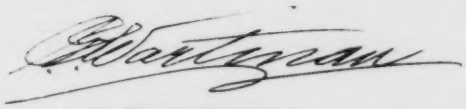
We would emphasize the need for love and understanding as a basis for all decisions concerning the elderly. We urge your commitment to action.

We present this report to you in confidence that the Government will immediately work towards implementing the Agency for the benefit of the people of Saskatchewan.

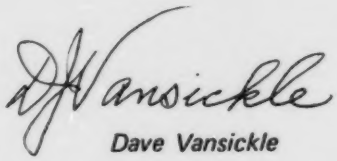
Yours very truly,

G. Bruce Wartman,
Chairman,
Senior Citizen's Commission.

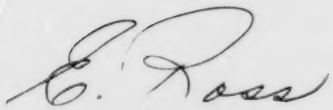
We, the undersigned members of the Senior Citizen's Commission, hereby submit the report of our findings, conclusions and recommendation in fulfillment of the responsibility given to us in Order in Council 135/73.



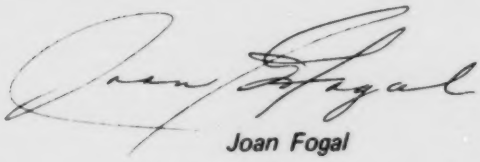
G. Bruce Wartman



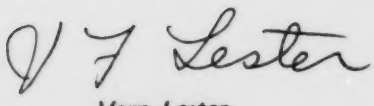
Dave Vansickle



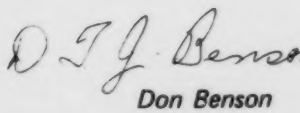
Elizabeth Ross



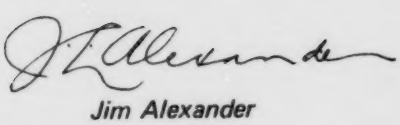
Joan Fogal



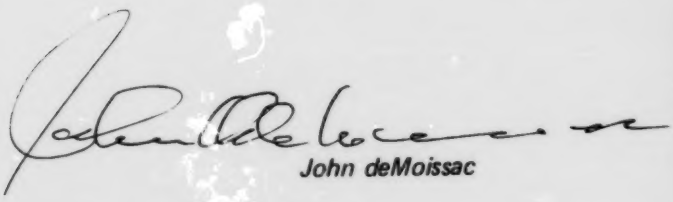
Vern Lester



Don Benson



Jim Alexander



John deMoissac

The Senior Citizen's Commission takes this opportunity to express special thanks and appreciation to our researcher, Brian Hansen, for the thorough, creative work he has done in research, organizing and writing, as well as for his loyalty, co-operation and optimism.

We thank Carol Kaip, our Secretary, for her patience, co-operation and considerable secretarial talent which has made our work much easier.

We thank Gary Grieves for helping to organize our study areas and often working with the members at inquiries. We express particular thanks and appreciation for the photographs he has done which appear in this report.

Dianna Burns and Pat Zacharias came to do special research for the Commission during the last half of the term. They have both given valuable service and in doing so have been most co-operative and congenial.

We also wish to express our sincere appreciation to all those other people in the province who have spoken and written to us about Senior Citizens concerns, and especially the Senior Citizens who spoke from their knowledge and years of experience.

101-07524/

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Old friends

In February of 1973, the Provincial Government appointed a nine-member Commission.

The task of this Commission was to study and report on the needs of the elderly.

This report is based on the study and impressions of the members in their short year of investigation.

This final report contains the major recommendation of the Senior Citizen's Commission.

In order to acquaint you with the older person, it is important to know just how many people this includes in Saskatchewan.

All of the numbers we will use in our count are of elderly people 65 years or more.

It is somewhat difficult to say this report isn't about anyone under 65 years.

This report is about all people who believe they're getting older

Guess that includes everyone.

At this moment,
one in every ten of us in this province
is over 65 years of age

For a total of approximately 98,000.

One in every ten over 65 years of age
is over 85

Approximately 9,800 people in this province were born in or before 1888.

A lot of things have happened since 1888.

Many things will still happen.

Much change is to come.

It is interesting to know something about changes after you become 65 years of age.

You generally have less money.

This year there are some 60,000 people over 65 years of age receiving a supplement in addition to their Old Age Security.

Some 25,000 receive the full Federal supplement.

Today a single person on Old Age Security plus full supplement receives $183.99 every month.

A married couple over 65 on Old Age Security and full supplement receive $351.02.

This figures out yearly to $2,207.88 if you're single and $4,212.24 if you are married.

Many people have ideas about poverty.
As many, we suppose, as the number of poverty lines these people draw.

Ask yourself if $2,207.88 is enough yearly income for any single person?

Can a couple live in 1974 on $4,212.24.

We believe a majority of Saskatchewan people over 65 years of age are living in a condition of poverty.

This situation is not unique to older people.

Poverty cuts across every age.

Many people are remarkably insensitive to the real facts of poverty,

in Saskatchewan

in Canada

or any nation.

We urge the province to continue it's efforts Federally toward the establishment of a Guaranteed Annual Income Program for all people.

We believe that $350 for individuals and $250 for each person of a couple are the minimum acceptable monthly levels of guarantee for the aged in Canada.

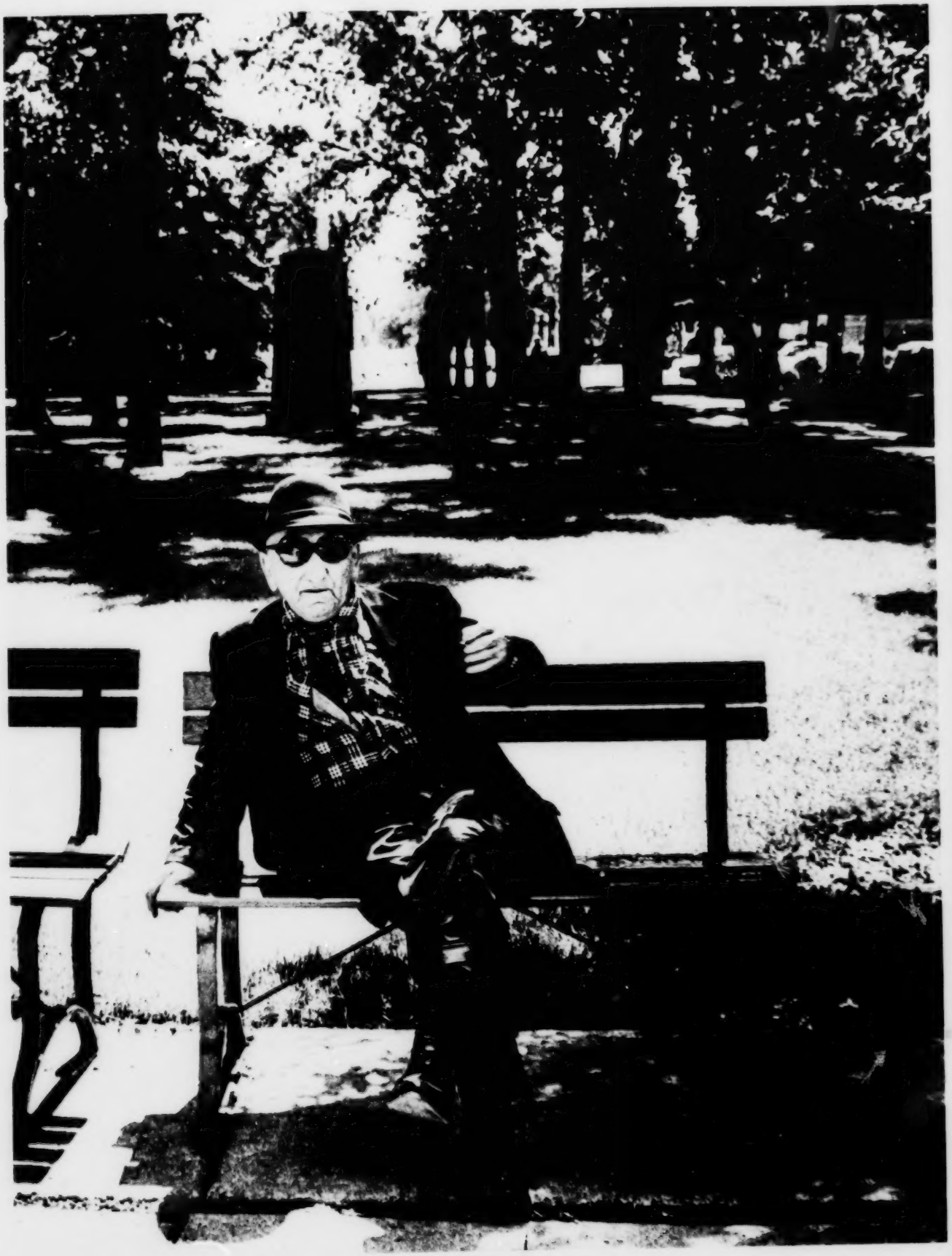
If wishes were horses . . .

Commissions are established for a number of reasons
change is supposed to be one.

More often they are established so government can do nothing for a time.

Time and time again reports are shelved,
having no prior commitment,
to get dusty and forgotten
so no change comes.

Is this Commission any exception?



If a study committee is established
shortly
after our report, as in the past,

and sees only how long
the government can safely rest

before
considering

one or two
of the more minor changes recommended,

they will miss entirely the importance of the main
recommendation.

Bureaucrats and their struggle to preserve

stand strongly, resisting change.

This is where the only opposition
will come.

We have seen many recommendations, many reports, committees
and study groups thrown out by the bureaucracy's
resistance to change.

We like to believe, have faith in,
the process
of democractic change.

When so few at the top
stand in the way,

it is often difficult to see this principle.

There is a struggle that goes deeper and penetrates
further than realized.

All of this is sadly
a reflection,

a mirror of ourselves.

All of this is only a part of what
goes on
every day
every way.

In 1963 an "Aged and Long-Term Illness Committee"
reported.

Little came of the report

with the exception of
dust.

We hope there is more prior commitment by
the government today

to this report
than the past years have seen.

There must be
a change
if change is to come.

Through the looking glass

To understand an older person,

it is essential
to speak of change,

and it's relationship to growing
older with time;

time that is changing.

Since 1900, 1800, 1700 ....

change has been
under opposition and struggle

change has come,

through the idealism of each age.

TASTY DEL

Through ages we have seen

simplicity and complexity,

more information and education,

the development of techniques in order to produce better or more.

Competition as a base for advancement and equality

has been built into our lives.

all roads lead
to Montreal Trust
R.R.S.P.
Real Estate

The old have seen a goal-orientated world forming,

again and again,

We are told we can rise above it all.

The design of our society is to pursue an ideal,

many live within the myth of progress

production has changed

creating

the technology of this age

present before us all,

working for us?

A necessary part of production is said to be efficiency,

translated to mean savings of money, material and man

in that order,

Why is it not working?

We produce more than we are capable of knowing

know more than we can sometimes understand.

Distribute with more inequality and waste.

The
WATCHTOWER
Awake!

Struggling through the advertising and display

our age

one of plastic and glass and steel invention

encasing our bodies,

framing the mind.

Witnessing breakdown
of family
society and man.

It is difficult to understand,
why we have not begun much sooner
to correct these wrongs

The old are somewhat slowed by it all,

many not having the skills required, are forced to stop,
compelled to retire,
obligated to move to one side.

People no longer able to produce

only consume every year

more . . .
inadequate housing
limited services
unnutritious food
drugs
hearing aids
medical care
hospital beds
nursing home beds . . .

Every day they experience the product
of changes

the decades have given
changes that have pushed man to one side.

Man alone in alienation.

Older men and women
facing life
alone
without assurance.

Women particularily

oppressed,

not having been free to discover an identity,

and acquire skills to use in living

removed from homemaking and motherhood,

regular income and pension.

Homestead to hostel

An older person in Saskatchewan,

has roots built primarily,

on working the land.

They know the meaning of co-operation through:

family farms
barn raising
quilting bees
church circles
one-room school houses
sleigh rides
hay rides
barn dances
home made ice cream
apple pie

Past remembrances.

Memories of a heritage.

101

Times were

work and play were in closer harmony,

family life was important,

reverent.

Social and community life was for all the family.

Times saw a change,

a dramatic, rapid change.

Self-sufficiency to reliance and dependence,

within a few decades.

Movement from rural to urban,

partly because of money
partly for security
partly because the land no longer offered the
promises the young had heard of in the big cities

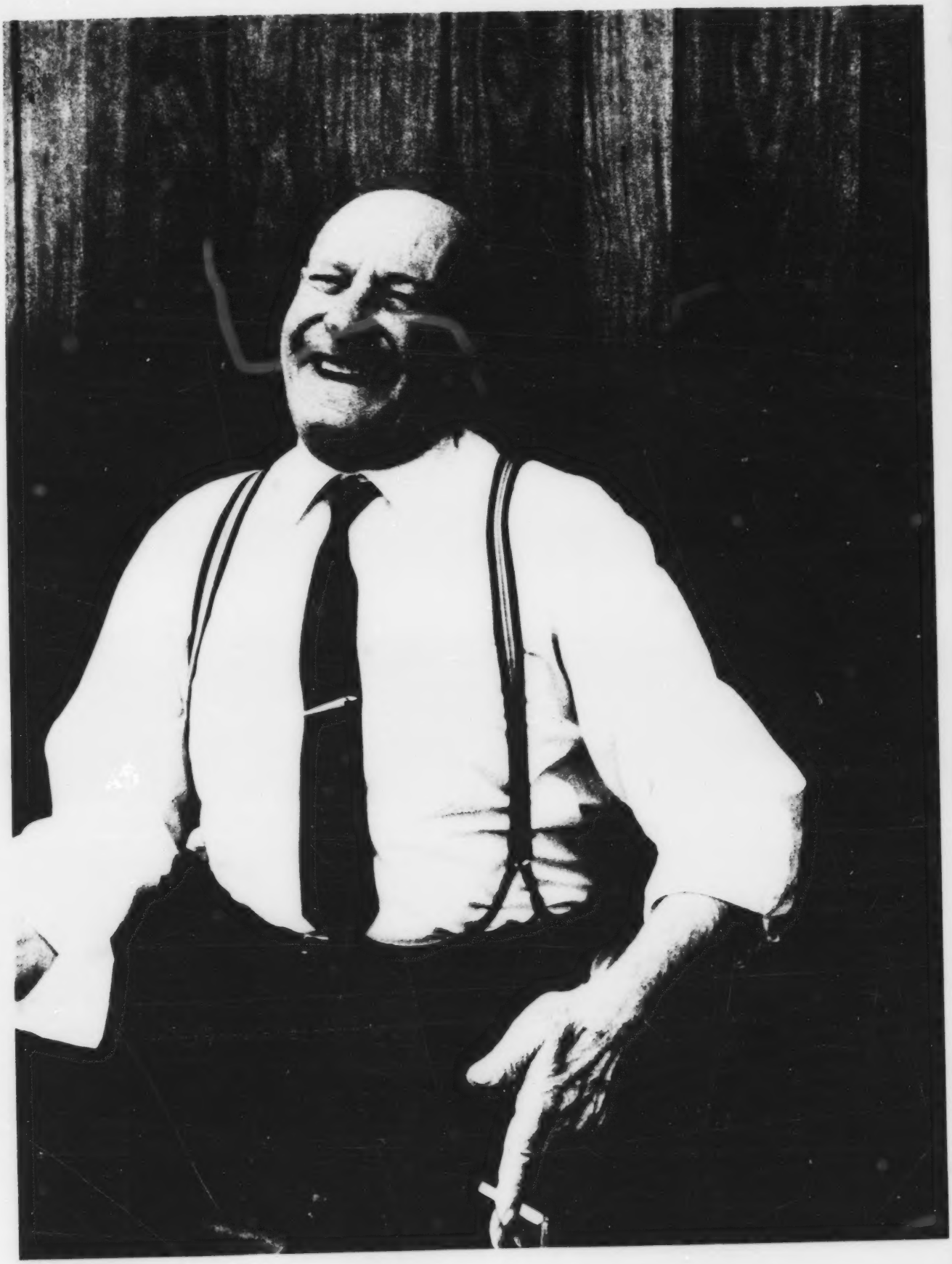
the promises of technology blinded,

unable to see what might happen

as values for self increased

values for others diminished

Co-operation replaced by self-interest.



Without the family unit

of grandparents, parents and children

as closely tied as before,

older persons tended to live alone more,
move to more nursing homes, special care homes
and boarding houses, or share homes with other older persons.

As family responsibilities narrowed,

with larger and larger numbers of older persons,

community integration became less spontaneous,

with family ties further apart

the old family responsibilities

gradually shifted to community concern and obligation

and government commitment.

Old age has become the object of a policy.

The recommendation

The Senior Citizen's Commission had a task that involved getting out into Saskatchewan and personally talking with people about their needs, wants and desires.

Because of our involvement, it became increasingly clear to this Commission that two basic problems were repeated over and over again. People, older persons particularly, do not have adequate access to any information that is necessary for making decisions. This problem was evident as we discussed areas of housing, community services and health care, with older people.

The older person in this province simply does not have any information about services and programs that do exist or about alternatives that could be available in housing, community services or health care. Rural Saskatchewan had considerably less information about these areas than did large urban centres, although the confusion and problem of "where to go for this or that" was common to both rural and urban older people.

If the myriad of government agencies and departments are confusing even to the long time public servant, can you imagine the difficulty of the old in this province. It is clearly beyond words.

Secondly, having a voice, "believing you have a say", knowing your ideas and concerns are considered, is a necessary and important part of anyone's life. We discovered that older people feel they have little or no voice in the areas of housing, community services and health care; basic areas that directly affect their lives.

To not have information about these basic areas, to have no voice in these areas, is tragic indeed. Without the necessary information, it is difficult to obtain opinions about the housing older persons preferred, what community and health services they would like to see available. Without a way of making your voice known, the problems of planning community and health services or housing to meet individual needs become compounded.

The elderly, for the most part, are segregated from the mainstream of society. As we have indicated, with the advent of retirement, thus the loss of productive worth, the elderly are pushed to one side. The mind of government in serving the interests of big business, labour and the professions, only gives token recognition to those who are not tied to these interests; namely the very poor and the aged. We believe the element of productive worth has been a great factor in the exclusion of the elderly from their right to programs and services and their lack of involvement in the planning process.

Independence should be an integral part of life. Older persons prefer to live in their own homes and remain there as long as possible. This point was made over and over during the course of our study. It is suggested that ground-level, single and double self-contained housing units were the alternatives of choice by the elderly. Special care and nursing homes were seen as only useful if one was no longer able to remain independent.

Older persons saw great value in having access to services through community based programs that would allow them to continue to remain at home. These service programs can broadly be defined as preventive, insofar as they ensure the older individual the independence and dignity of remaining healthy and at home.

Services that presently exist in our province are fragmented and without co-ordination. Basic services primarily of this preventive nature for the elderly, are under two departments; the Department of Public Health and the Department of Social Services. These two basic services are Home Nursing Care (i.e. orderly services, physiotherapy, occupational therapy) and Community Services (i.e. meal service, homemaker, phone-call-a-day, visiting services and recreational). We commend the government for the work in these two service areas. However, we believe that these services mark only the beginning of a necessary ongoing commitment.

The Senior Citizen's Commission has recognized the difficulty experienced by the elderly in not having access to a single, identifiable group to provide services. We believe these two service areas of Home Nursing Care and Community Services presently provided by the two departments of Public Health and Social Services should receive a large increase in financial support and be integrated formally into an agency.

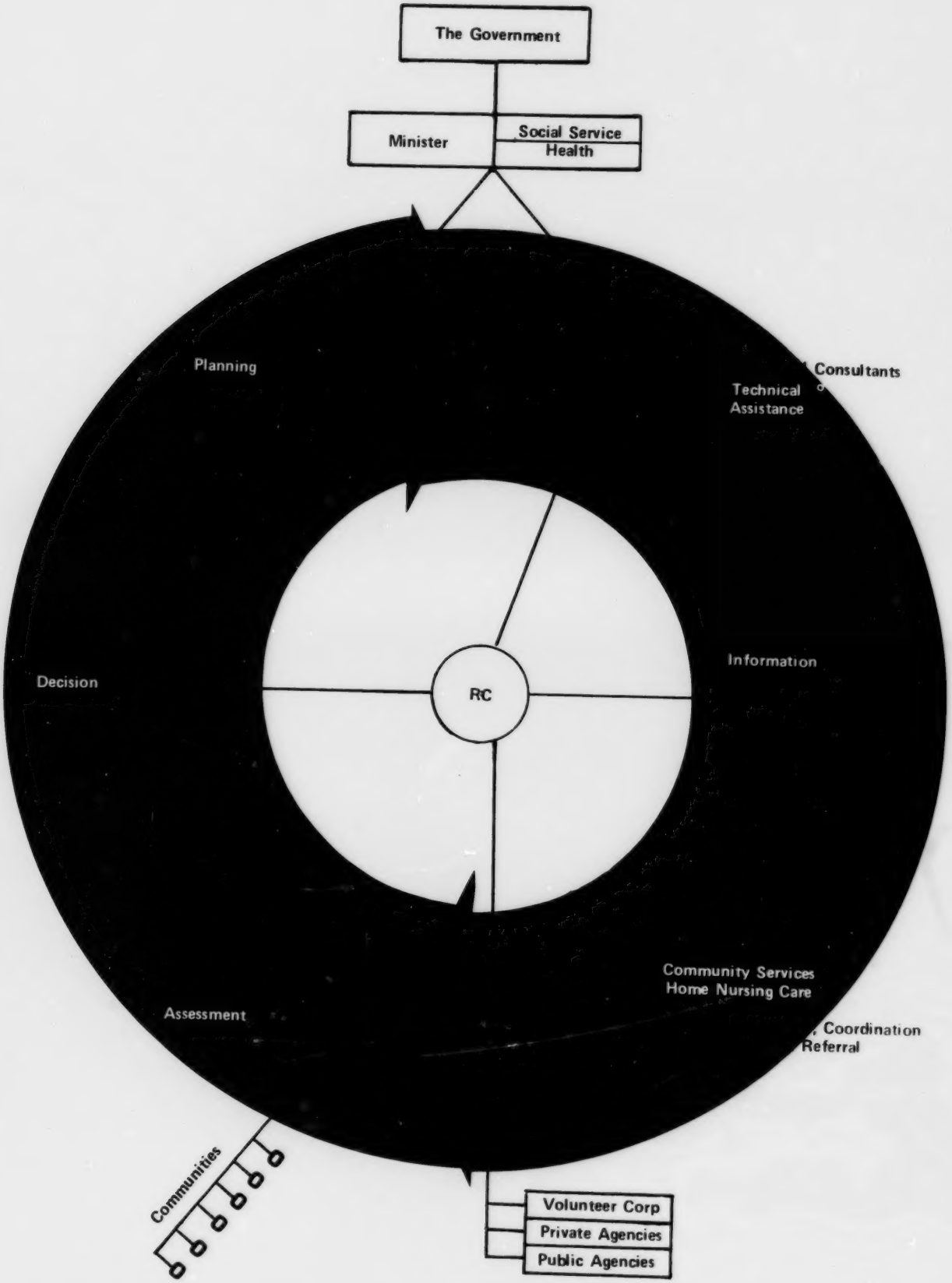
Summary

In order to ensure the elderly access and availability to these services, a provincial system based on information, co-ordination and referral should be the building block of this agency.

In order to ensure the elderly a voice in determining needs and planning services to meet these needs, a provincial system of councils should be tied to the agency to allow for citizen participation through planning and decision making.

RECOMMENDATION

The Senior Citizen's Commission urges the provincial government to establish an Agency as part of a new deal for the elderly in Saskatchewan.


The Government
Minister
Social Service
Health
Planning
Consultants
Technical
Assistance
Information
Decision
RC
Community Services
Home Nursing Care
Assessment
Coordination
Referral
Communities
Volunteer Corp
Private Agencies
Public Agencies

THE AGENCY

Purpose:

1. *To provide for the delivery of community services and home nursing care services to the elderly in their own home, in order to ensure independence and well being.*

2. *To ensure communication to the highest levels of government through the provision of a provincial system of information, co-ordination and referral.*

Objectives:

1. *To develop a community base for research at the local level in order to document the needs of the elderly.*

2. *To involve the elderly in the development of programs and services sensitive to their needs.*

3. *To stimulate community involvement in meeting the needs of the elderly:*
   - *(a) Encouraging citizen participation and public awareness of needs and resources.*
   - *(b) Development of planning groups in order to assess the needs at a local level.*

4. *To provide resources required to develop programs and services for/by the elderly.*

5. *To provide the elderly with programs and services of a preventive nature, in their place of residence, in order to ensure personal dignity and independence, through a method that will stimulate the involvement of the elderly into the mainstream of life.*

6. *To develop public awareness in respect to the special aspects of aging:*
   - *(a) Continuing Education, Pre-retirement Counselling.*
   - *(b) Employment and retirement, pensions.*

LOCAL COUNCIL

Purpose:

To represent local interests in providing services to the elderly.

Objectives:

1. *To represent the views of the elderly.*

2. *To set guidelines for the growth of community programs for the aged.*

3. *To serve as a bureau where Senior Citizens can voice their concerns or criticisms of community service and to seek solutions for these matters locally or through regional representation.*

4. *To co-ordinate existing services for the aged within that locale.*

5. *To prompt community action in meeting the needs of their elderly.*

6. *To provide a representative from the Local Council to sit on the Regional Council. These delegates would represent the views of their area in :*
   - *(a) Establishing regional guidelines for community development.*
   - *(b) Providing information concerning local activity.*
   - *(c) Advising in the allotment of monies for program budgets.*

7. *To act as a central organizing body for all other groups and individuals active within that locale.*

8. *To establish an information, co-ordination and referral centre to carry out the objectives of the Local Council.*

Local Council Guidelines:

1. *Council membership must include Senior Citizens and those people in the community who are involved in services to the aged.*

2. *The Council must ensure the representation of it's Senior Citizens through 60% of it's number being pensionable age or over.*

3. *The initial council representing up to five communities must number no more than five allowing each additional participating community to provide one council member until the council reaches it's maximum number of twelve members.*

4. *Council may meet as often as it wishes but no less than twice a month.*

5. *Council must be a legally recognized society meeting the requirements of The Societies Act.*

LOCAL INFORMATION, CO-ORDINATION, REFERRAL CENTRE

Purpose:

To carry out the instructions of the Local Council in meeting their objectives.

Duties:

1. *General:*

   (a) To work with the Regional Co-ordinator at the local level in the presentation and explanation of community program packages established by the provincial agency.

   (b) To advise local groups and individuals in matters of regional concern such as:

      (i) regional guidelines regulating local program activity.

      (ii) Funds available for developing program ideas.

      (iii) Information about activities and ideas employed in other communities.

   (c) To catalogue detailed information concerning the needs and services of the elderly. This data would include:

      (i) Records of service activity enabling the Local Council to maintain reliable information about their community.

      (ii) Records of ideas and issues brought to the attention of the centre by Senior Citizens.

   Such information would provide assistance to:

      (i) The local Council in their decision-making.

      (ii) The Regional Co-ordinator in planning the direction and nature of regional programming.

      (iii) The Provincial Council and Agency consultants in making realistic decisions within government.

   (d) To provide the Region with locally gathered information relating to any specific research project conducted by the Provincial Council.

2. *Specific:*

(a) *To co-ordinate Home nursing care and community services for Senior Citizens:*

(i) *As viewed by the government these services have equal authority to the Information, Co-ordination, Referral Centre. Therefore, the role of the Centre is to assist these community groups through:*

- *Assuring the use of their programs by informing inquirers of services available to them and referring the person to the organization which best meets his or her needs.*
- *Assisting services with resources, i.e. volunteer support, telephone answering service, advertising, etc.*
- *Involving people in discussion of services at community meetings to develop ideas and interest in these local activities.*

(ii) *Where these services do not exist the Information, Co-ordination, Referral Centre will assume the responsibility of establishing programs to respond to the needs defined by it's Local and Regional Council.*

(b) *To establish study/action group meetings to discuss issues of mutual concern to the Senior Citizen, i.e. housing, tax exemptions, transportation, etc. This encourages local groups to take action in meeting these needs within their community.*

(c) *To provide a central registry of information to match the needs of the elderly with the services available for them. Additional information the Centre will have to assist it's work are community service programming packages developed by the provincial agency. These packages will be made available to interested groups and individuals and the Centre will assist them with this information in establishing community services for the aged.*

Local Information, Co-ordination, Referral Centre Guidelines:

1. *Established by the Local Council through a Community Development Grant provided by the Provincial Agency. The Province will finance 80% of the salary costs; the Local Council will assume the balance of the financial responsibility.*

2. *Staffing and work schedule are determined by the Local Council.*

3. *Local Council provides the guidelines for staff activities.*

4. *Staff may advise the Local Council in their decision-making.*

REGIONAL COUNCIL

Purpose:

To provide the Local Councils with Regional Authority in matters concerning the assessment of the needs of the elderly; and decision regarding the development of community programs and services.

Objectives:

1. *To agree on a regional course which reflects the interests as decided by local communities.*

2. *To describe local needs through regional pursuits of provincial policy:*

   (a) based on facts obtained through the local system of data collection drawing comparisons and showing trends which point out inadequate service and needed development.

3. *To co-ordinate local activities when it would prove more economical or beneficial to work together as a region; i.e. In programs that require pre-determined attendance.*

4. *Seek to provide solutions to local problems that are referred to the regional council. Eg. Complaints or suggestions regarding administration of special care homes. Eg. Program financing.*

5. *To make decisions regarding allocation of finances and budget appraisals:*

   (a) approve final submissions from individual community service programs (i.e. Home Nursing Care and Meals on Wheels).

6. *To co-operate with regional representatives on inter-government problems.*

7. *To develop associate membership to act as a resource pool for the appointed council:*

   (a) Pursued affiliation – Regional Staff of:

   (i) Public Health – eg. Institution boards.

   (ii) Social Services – eg. Existing Councils

   (iii) Education – eg. Community Colleges.

   (iv) Municipal Government.

   (v) Library.

   (vi) Community Workers – eg. H.R.D.A.

8. *To send delegates from the regional council to represent the concerns of their region when developing policies at the provincial council.*

THE REGIONAL CO-ORDINATOR

Purpose:

As a permanent employee of the provincial government the person hired shall:

1. *Fulfill the duties as defined by the establishment of the provincial agency.*

2. *Be accountable to the agency director and regional council.*

3. *Work in close consultation with other regional co-ordinators and the provincial resource persons.*

4. *Would be knowledgeable and experienced in matters relating to community work and programs.*

Interim Duties:

The regional co-ordinator will:

1. *Begin working in an area of the province where some program development exists.*

2. *Be responsible for co-ordinating activities with communities that work well together and are capable of defining as a region.*

3. *Assess which communities would co-operate effectively in forming Local Area Councils to represent their needs.*

Local Interim Activity:

The first concern of the regional co-ordinator will be to become acquainted with the members of local communities and aware of their contributions to the social activity in progress.

1. *Support must be gained by communication with local councils on aging, community service oriented organizations;*

   Eg. Church Councils,
   Special Care Home Boards
   Line Departments

   and individuals (eg. librarian, V.O.N.) involved in service capacities.

2. *A planning group is formed to:*

   (a) Encourage an atmosphere of co-operation between volunteer groups and the proposed agency.

   (b) Involve and inform the community.

   (c) Encourage community participation & involvement in planning and program development.

   (d) Publicize and stimulate interest and participation in the public meeting.

Ongoing Duties of the Regional Co-ordinator:

A. To arrange a public meeting in the local community:

1. To explain the establishment of a provincial agency to co-ordinate services and develop programs for/by the elderly.

(a) To more actively involve Senior Citizens in the community.

(b) To develop support services that will afford independence to elderly persons in their homes or within institutions.

(c) To create public awareness in regard to the changes that occur upon growing older.

2. To outline the structure and function of the projected Agency:

(a) Purpose (Provide for Community Service):

(i) To compile information on available services to match needs of the elderly to resources and keep account of unmet needs.

(b) Priorities:

(i) Emphasis will be placed on the immediate needs distinguished for Community Services and home nursing care based on the findings of the Senior Citizen's Commission inquiry.

(ii) An immediate goal of the agency will be to build a communication network between the local community and the provincial government; i.e. through a centre for information co-ordination and referral service.

(iii) To introduce a preventive component to ensure the elderly improved physical health and independence and enriched quality of life by providing adequate home nursing care and community services.

(c) *Finances:*

(i) *Grants for both existing and developing community service programs shall be obtained through the Local Council.*
– avoiding overlapping and duplication of services.

(ii) *Established programs shall receive direct funding from the province on approval of the Regional Council.*

(iii) *Newly developed programs that have received provincial approval on recommendation from the region shall be funded through the Regional Council.*

(d) *Membership on Local Council:*

(i) *Each participating community must be guaranteed at least one voting representative on the Local Council.*

3. *To receive nominations for positions on the Local Council for election at the public meeting in the local community, clearly indicating the level of necessary involvement for those appointed:*

(a) *Frequency of Meetings – The Council shall meet as often as desired but is required to meet no less than twice a month.*

(b) *Senior Citizen Majority – In order to truly represent the needs and desired (concerns) (wishes) of our senior population, the Council must be composed of no less than 60% of persons of pensionable age or over.*

(c) *Location – As more than one community will be represented, meetings may rotate.*

B. *To act as a direct tie in communication between the Local Community worker and the Agency staff at the provincial level.*

1. *To report on local evaluation of services (data suggesting direction for program development) and required research.*

2. *To inform the person responsible locally of provincial policy:*

(a) *Distribute provincially prepared information on all government policy and directions in programs.*
– organizing the information so it is easily obtainable and supervise it's distribution at the local level.

3. *To assist and give guidance with matters involving community service development:*

   (a) *To train the local community worker to increase efficiency and ensure a level of competency.*

   (b) *To explain program package material as a means of ensuring the proper data is recorded and categorized.*

   (c) *To make clear and understandable, aspects of the service programs:*

      (i) *Advise on:*

         –Operation of home nursing care and community service programs.

         – Conditions of eligibility for community program subscription; i.e. budget and finances.

4. *To provide knowledge regarding budget allocation and financing.*

5. *To define steps to assist in operation of programs. I.E. evaluation of community acceptance or need.*

C. *To co-ordinate local activity by establishing a Regional Council composed of local representatives:*

1. *Assure equal representation from Local Councils:*

   (a) *Suggest payment of small sum of money to alleviate travel expenses.*

2. *Act as an advisor to the Regional Council, acquainting it with provincial policy, program information and reports on local activity:*

   (a) *Prepares information outlining trends in local activity.*

   (b) *Does comparative evaluation studies of program effectiveness throughout the region.*

   (c) *To ensure that unorganized territories that lack service be given a voice at the regional level and priority be placed on initiating program development in these areas.*

3. *Assuming responsibility for arranging for meeting times, reserving space and informing local representatives to the Regional Council.*

D. Interaction with Provincial Consultants:

1. Regional co-ordinators and provincial consultants share responsibility to develop a total picture of provincial concern and co-operate to co-ordinate provincial activity.

This naturally will necessitate regular meetings or frequent workshop sessions.

2. Regional Co-ordinators will maintain close contact:

(a) Through planning sessions evolved around implementing programs.

(b) Co-operate for conducting in-service training.

(c) Formulate regional boundaries and mutual areas of future co-operation.

PROVINCIAL COUNCIL

The purpose and objectives of the Provincial Council are the same as those outlined for the entire Agency.

PROVINCIAL CONSULTANT TEAM

Purpose: *To provide technical assistance to the Agency in meeting the objectives outlined by the Minister and the Provincial Council.*

Objectives *are outlined for each consultant in the following section.*

PROVINCIAL CONSULTANTS

Program Consultant – Social Services:

1. *To be responsible for the preparation of material concerning community services (i.e. homemaker, meals on wheels, phone-call-a-day, recreation services, transportation, activity centres, aides to independent living, personal services):*

   (a) Ways and means of service delivery.

   (b) Evaluation of service program at a local level (in consultation with the research consultant)
   – this will be a package of material included for local level action and use.

2. *Assume responsibilities for aggregation of budgets locally assessed and regionally approved for presentation to the provincial government for funding.*

3. *To work in co-operation with the government department of Social Services in terms of proposed universal programs, their consideration and implementation with respect to the elderly.*

4. *To act as an advisor to the regional co-ordinator in these matters.*

Program Consultant – Home Nursing Care

1. *To be responsible for the preparation of material concerning home nursing care*

   (a) Ways and means of service delivery

   (b) Evaluation of service program at a local level (in consultation with the research consultant)
   – this will be package material included for local level action and use.

2. *Assume responsibilities for aggregation of budgets locally assessed and regionally approved for presentation to the provincial government for funding.*

3. *To work in co-operation with the government department of Public Health in terms of proposed universal programs, their consideration and implementation with respect to the elderly.*

4. *To act as an advisor to the regional co-ordinator in these matters.*

Research Consultant

1. *To work in an advisory capacity with the regional co-ordinator determining the programs and services best developed to meet the requirements at a local, regional and provincial level.*

2. *To assume broad responsibilities for on-going research projects either through the agency or in co-operation with other various government departments and agencies.*

   These research projects include:

   (a) **Since there is evidence that the number of level 1 and 2 beds in this province should be reduced,** *a study shall be undertaken with a view to recommending the ways and means of implementation.*

   (b) **Since there is evidence that level 3 care costs are a serious financial problem to our elderly people, an insured service for level 3 should be implemented immediately,** *and a study shall be undertaken with a view to recommending the amount of room and board to be charged.*

   (c) To undertake a feasibility study to determine if level 4 should be assessed a room and board charge.

   (d) **Since there is strong evidence that ground level, subsidized self-contained housing units (single and double) are required in Saskatchewan communities,** *a study shall be undertaken in order to determine the numbers, location and type (design) of these units, in order to ensure integration of the elderly to the mainstream of life.*

   (e) **Since there are specific transportation requirements of the elderly not presently met on a provincial basis,** *a study shall be undertaken in order to determine the ways and means of facilitating and developing a voluntary transportation service, subsidized taxi service, to include school buses.*

   (f) **Since the high cost of prescription drugs is a heavy burden to the elderly,** *a study shall be undertaken with a view to outlining the specific requirements of an insured drug program.*

   (g) **Since adequate eye care for elderly persons is not readily available,** *a study shall be undertaken with a view to outlining a comprehensive sight-screening program, with a supplementary study undertaken to determine the feasibility of an insured total eye care program for the elderly.*

   (h) **Since chiropody services are almost non-existent in this province,** *a study shall be undertaken with a view to outlining the program to assure comprehensive chiropody services.*

   (i) To determine the feasibility of greater involvement of the elderly in day care activities for people of all ages.

(j) *To work out a method of bringing library resources to the home, to assure greater availability and access to ethnic and handicapped individual requests.*

(k) *To study and recommend ways of involving those persons in special care facilities in community activities for the elderly.*

(l) *To study the feasibility of a mobile hearing aid unit to ensure greater accessibility of this service to the elderly.*

(m) *To study the feasibility of a provincial pension program which will ensure full portability and vesting rights.*

Information Consultant:

1. *To prepare a monthly agency bulletin that will include (aside from general Policy)*

   (a) *Reports of the various services being delivered by the agency.*

   (b) *Information about services the agency can refer to other provincial departments and private agencies.*

   (c) *Interest items from the local area councils with a view to bringing the region(s) together more closely around specific issues and programs.*

2. *To assist the provincial consultants in the most effective ways of providing material to be used in the local area, i.e. material to be used for the collection of data regarding the needs of the elderly.*

3. *To provide general information to the various government departments in order to keep them informed about the agency.*

4. *To prepare news releases and pamphlets, meeting announcements, in line with the over-all direction and policy of the agency.*

– *The Information Consultant will be instrumental in using the ways and means of bringing elderly people together through information gathering and sharing by way of the news bulletins. This bulletin would outline the agency to various people and indicate those in the agency responsible at the local area, regional area and provincial area for the overall direction of the agency.*

Educational Consultant:

1. *Responsibilities include the preparation of material for use at a local level in order to develop public awareness in respect to the special aspects of aging*

   (a) *Involvement at a medical education level . . . sponsorship of an on-going continuing medical education program on aging for the health professionals.*

   (b) *Involvement in staff training programs for those involved in any way with the care of the elderly:*
   (i) *Institutional care*
   (ii) *Community Services i.e. homemakers and nursing home care.*

2. *To work in the broader educational areas with institutions in developing curricula within courses with respect to the special aspects of aging:*

   (a) University, Schools of Social Work, Theological Colleges.

   (b) Public Schools, Separate Schools, High Schools, Community Colleges, Institutes of Applied Arts and Sciences.

3. *To be responsible for the preparation of material for use in*

   (a) preventive Health Education for the elderly.

   (b) Seminars on legal rights, pensions, etc.

The Educational Consultant and the Information Consultant shall work towards the preparation of material to be presented through the media with a view to informing people with regard to the special aspects of aging. This may take the form of contracting film or video presentation for television, preparation of radio program material, articles for newspaper and magazine.

MAKING IT WORK

In order to lay the groundwork and develop the background for the Agency, it is the suggestion of the Senior Citizen's Commission that an interim Provincial Council be established in order to assist the Minister(s) in matters regarding

(a) Staff selection at a provincial level.

(b) Recruitment of Regional Co-ordinators.

(c) Training and education of the Provincial and Regional Staff towards the establishment of the Agency at the Local level, Regional and Provincial level.

It is suggested that the Agency begin with a director, an administrator, six provincial consultants, six regional co-ordinators and up to six local Information, Co-ordination and Referral personnel per region for a total of 36 local people.

In order to establish the Regional boundaries of the Agency, the six co-ordinators will work in broad areas of the province. Boundaries will not be imposed, as the regional co-ordinators are to attempt to inject sensitivity into defining the regions, perhaps culturally; also being aware of possible developments in the area of coterminous boundaries for Departments of Health and Social Services.

The Appendix

CONSTITUTION

Local Council

Incorporation under The Societies Act:

1. *The council must ensure the representation of it's Senior Citizens through 60% of it's number being the pensionable age or over.*

2. *The initial council including up to five communities must number no more than five allowing each new participating community to provide one council member until the council reaches it's maximum of twelve members.*

3. *A term of office for the council member shall be two years with no member holding a position for more than two consecutive terms. Following the initiating two year term, half of the council must seek re-election and half of the council must be carried over the next year.*

   This will ensure a rotating membership every year of one-half the members.

Responsibilities

PROVINCIAL

1. *To consider remuneration for those caring for relatives.*

2. *Unannounced inspection and evaluation of nursing homes.*

3. *Consideration of tax reduction on property for those over 65 years of age.*

4. *To consider an insured dental care program for those over 65 years of age.*

5. *Special Care and Nursing Homes should only have a 95% occupancy rate to allow for emergency and short stays.*

6. *Consideration of regulations for the admittance of mentally ill patients in chronic care facilities and special care facilities.*

7. *Special care homes should have a minimum number of double rooms.*

8. *Doors in special care facilities should be equipped with locks to ensure privacy.*

9. *Since special care homes are for the comfort of the elderly and not the convenience of the staff, there should be more flexibility in services and meals at hours determined by individual choice.*

10. *Mandatory medical checkups on a regular basis by physicians for those in Nursing and Special Care Homes.*

11. *No highrise developments should be built until alternatives are adequately presented to the elderly and every effort made to give the elderly an opportunity to integrate with other persons of various ages, (i.e. floor separation of young and old with common recreation facilities).*

12. *Encouragement of co-operative housing developments for those elderly people able to invest.*

13. *In any housing development, ground level suites should be for the elderly.*

14. *When one person of a couple enters a special care home, the assets should be divided equally, regardless of income or finances.*

15. *That the recommendation 89 of the Status of Women in Canada report be implemented:*

    "89. Therefore, we recommend that those provinces and territories, which have not already done so, amend their law in order to recognize the concept of equal partnership in marriage so that the contribution of each spouse to the marriage partnership may be acknowledged and that, upon the dissolution of the marriage, each will have a right to an equal share in the assets accumulated during marriage otherwise than by gift or inheritance received by either spouse from outside sources."

FEDERAL

1. *Pensions to be available at 60 years of age.*

2. *There should be no compulsory retirement allowed.*

3. *That the recommendation 103 of the Status of Women in Canada report be implemented:*

   "103. Therefore, we recommend that (a) both the Canada and the Quebec Pension Plans be amended so that the spouse who remains at home can participate in the Plan, and (b) the feasibility be explored of

   (i) crediting to the spouse remaining at home a portion of the contributions of the employed spouse and those contributions made by the employer on the employed spouse's behalf and

   (ii) on an optional basis, permitting the spouse at home to contribute as a self-employed worker."

The Study

TERMS OF REFERENCE

It is recorded in "Votes and Proceedings" of the Saskatchewan Legislature of April 21, 1972, that:

"Resolution (No. 18) was moved by Mr. Steuart, seconded by Mr. Grant: That this Assembly recommends to the Government of Saskatchewan that it set up a special senior citizens' provincial commission upon which senior citizens' organizations will have representation to study and report on the following:

(a) The need for a special provincial government department for senior citizens headed by a competent person of mature age.

(b) Nursing or supervisory care centres.

(c) Senior citizens' apartment or grouped units.

(d) The practicality of a school tax exemption for senior citizens.

(e) The effectiveness and practicality of an expanded "meals on wheels" program for senior citizens.

(f) The major new program announced in Great Britain to give a "new lease on life" to senior citizens.

(g) The need for for a substantial increase in the basic rate of pension, and the need of incorporating a "cost of living" clause in the formula which would automatically adjust income periodically in order to keep pace with general living costs.

A debate arising and the question being put, it was agreed to."

PRIORITIES

1. *Development of mechanisms for the more efficient planning, co-ordinating and delivery of services, and the methods whereby community organizations and individuals can participate in assessing needs and planning services to meet those needs on an on-going basis.*

2. *Housing – alternatives available.*

3. *The criteria for the establishment of all types of community services for the elderly that would ensure an independent and fuller life.*

4. *Health – Level IV.*

METHODOLOGY

Priorities were established by the Senior Citizen's Commission in order to focus attention on the Terms of Reference as outlined by the legislature. The first priority, simply stated as the ways and means of making information and help available was central to our course of study.

A random selection of study locations was determined for the population sizes of:

0 – 500	*Plenty, Coronach, Govan, Stenen, Leask*
500 – 1,000	*St. Walburg, Central Butte, Carrot River, Arcola, Watson.*
1,000 – 5,000	*Hudson Bay, Unity, Shaunavon, Melville, Indian Head.*
5,000 – 30,000	*Swift Current, Weyburn, Prince Albert, Melfort, Moose Jaw.*
30,000 and over	*Saskatoon, Regina.*

The Commission prepared a community check list for use in the 22 study locations throughout the province. This community check list included all of the possible housing alternatives and community support services, along with a section for comment or criticism of Health Care. Availability of information and voice in decision making regarding Housing, Community Support Services and Health Care; adequacy of finances in these three areas was covered by the study.

In each study location, with the exception of Regina, a telephone system was utilized. A hospitality-tea and coffee social event was sponsored in all study locations with the exception of Regina and Saskatoon. Local community people were instructed on the use of the check list.

Advertising was prepared for use on television, radio and local newspapers, in addition to material circulated by contacts in many service orientated groups and organizations. The advertisement material outlining the priorities served to encourage local people to participate in the inquiry either by telephoning or attending the hospitality event.

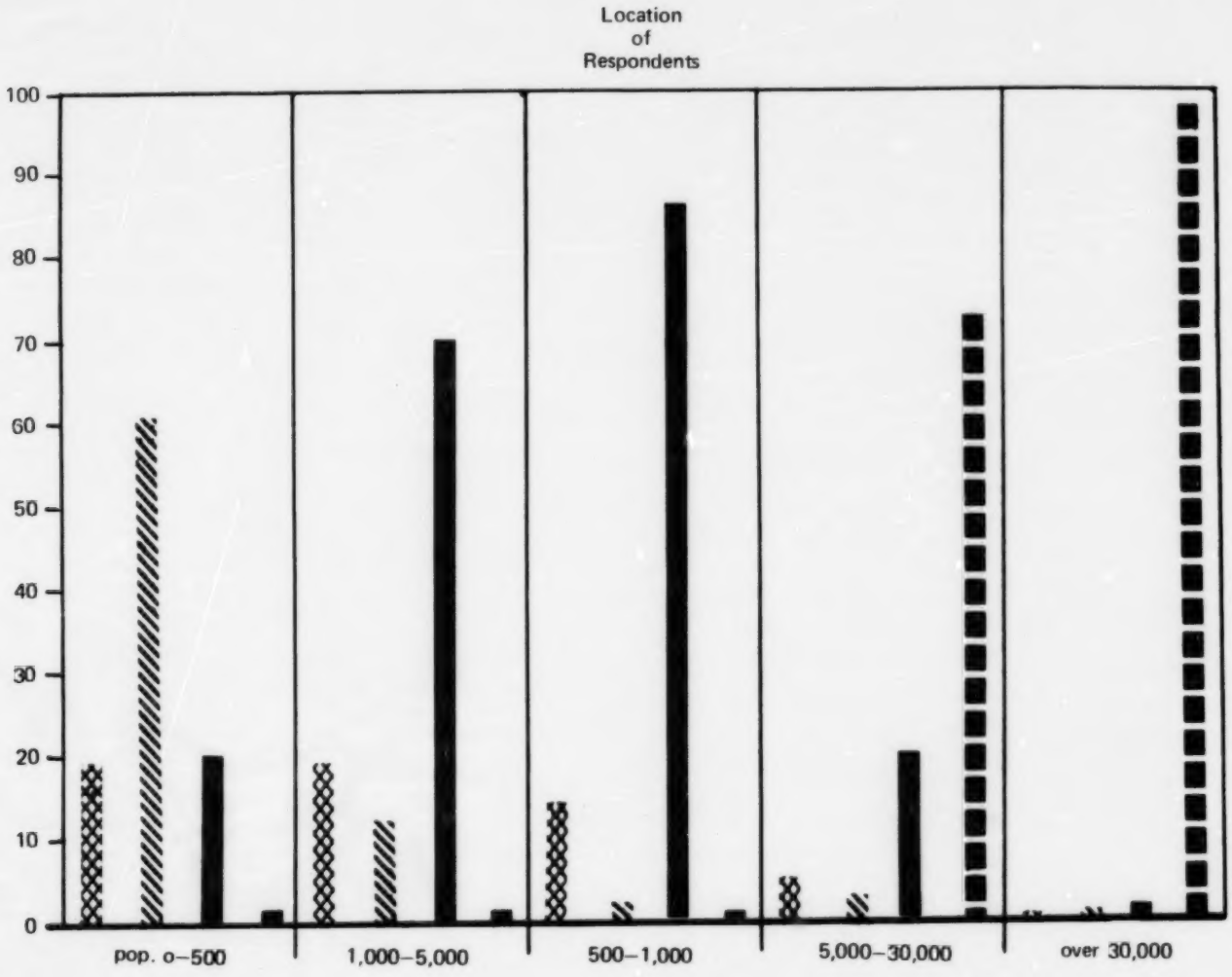
In smaller communities the telephone system and the hospitality event were held simultaneously. In larger communities the hospitality event was held on the day preceding the telephone system. The Commission held only a telephone system in Saskatoon. In Regina, a joint study was arranged with the Family Service Bureau and the Senior Citizen's Day Centre. These two groups had received a New Horizon's Grant from the Federal government, which was directly in line with the study the Commission was to undertake. Elderly people, using our check list and a form prepared by the Family Service Bureau and the Senior Citizen's Day Centre, visited the homes of other elderly people to make a person-to-person contact and complete the forms.

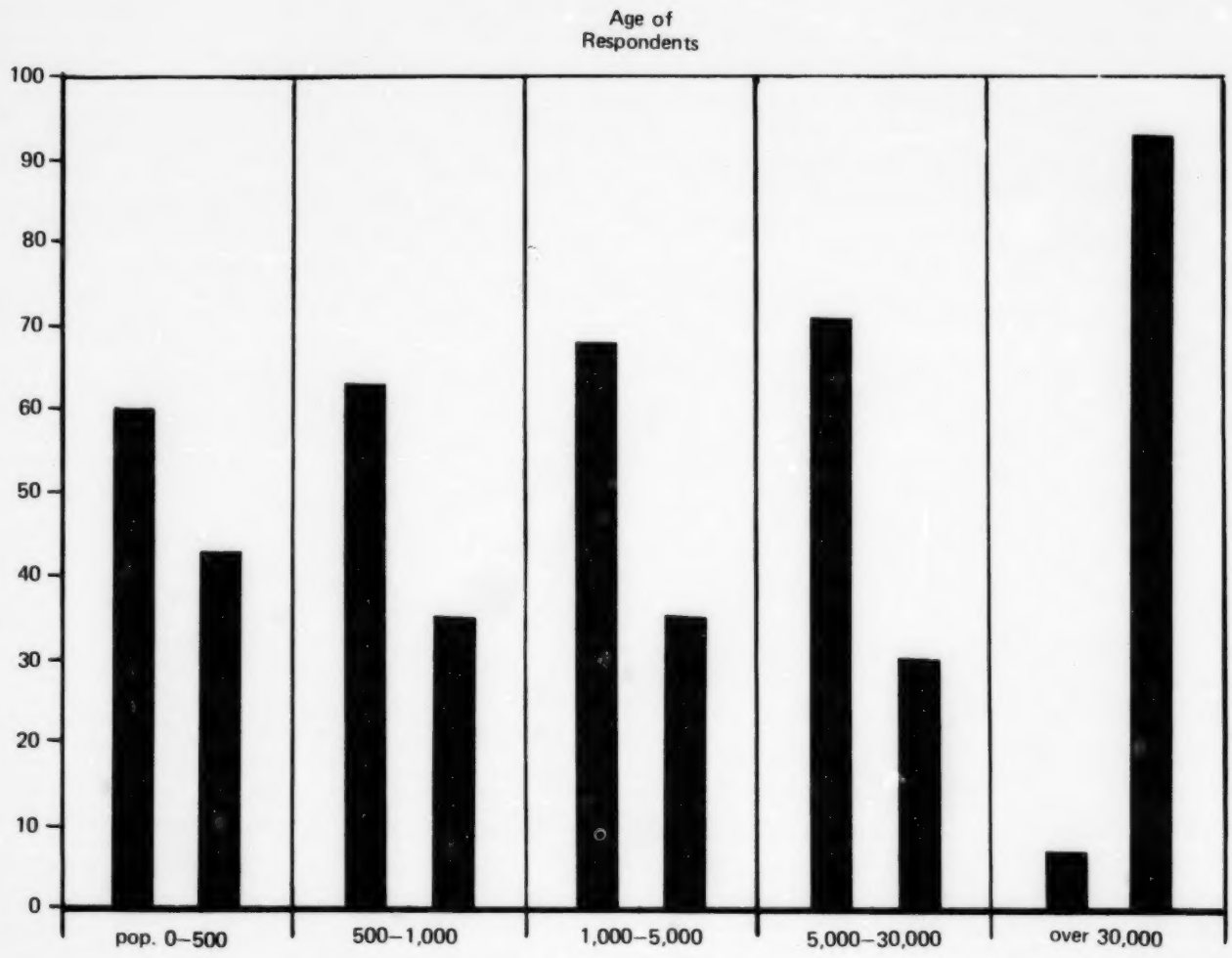
Using the community check list requires that those administering it must become good listeners. People were free to comment on the priorities and the check list was filled out as the conversation progressed. This method allowed for a warmer atmosphere with less rigidness.

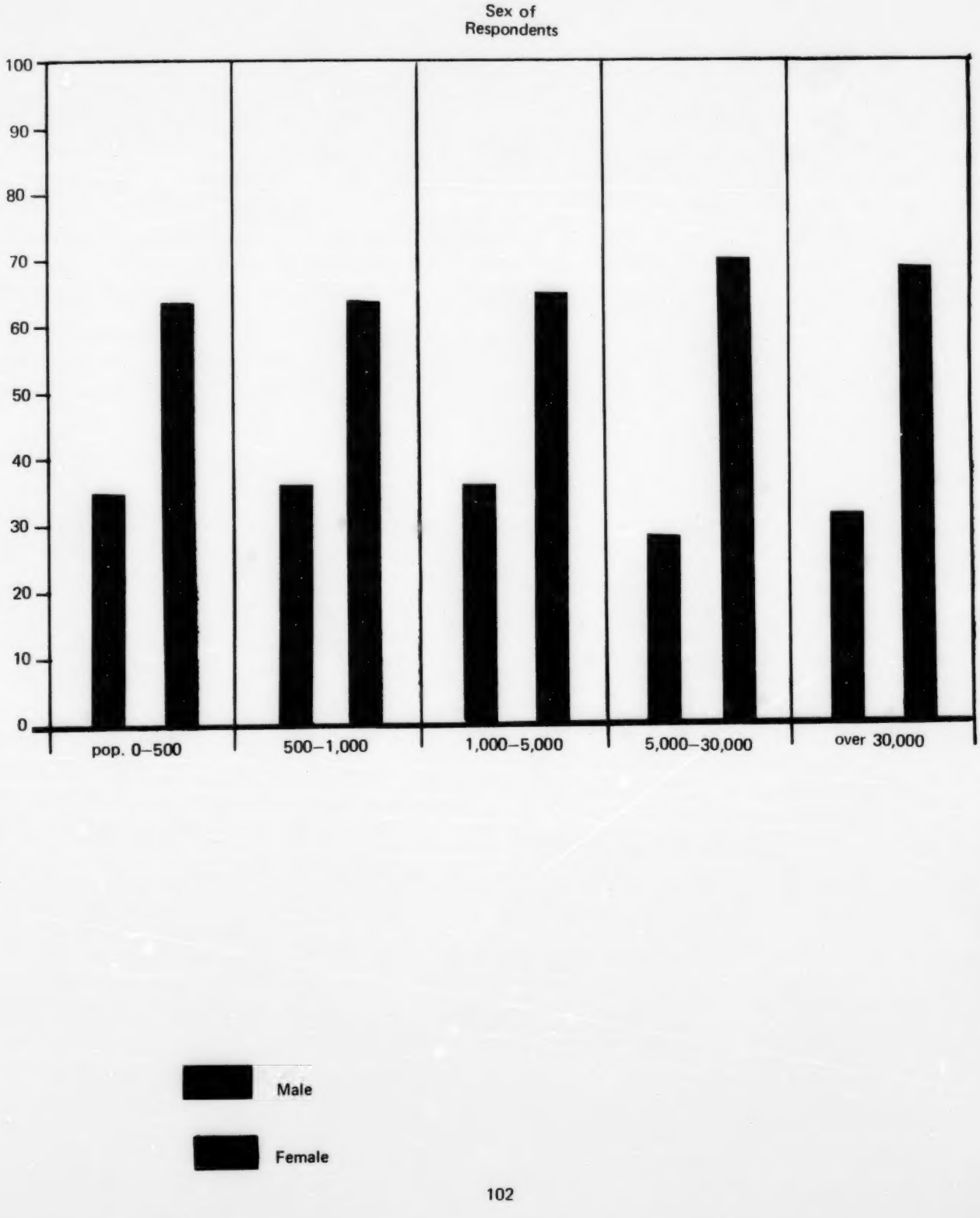
The community check lists were compiled by a computer in Regina.

Follow-up meetings were arranged by the Commission for all study locations (exception of Regina and Saskatoon) to discuss the results of the local inquiry.

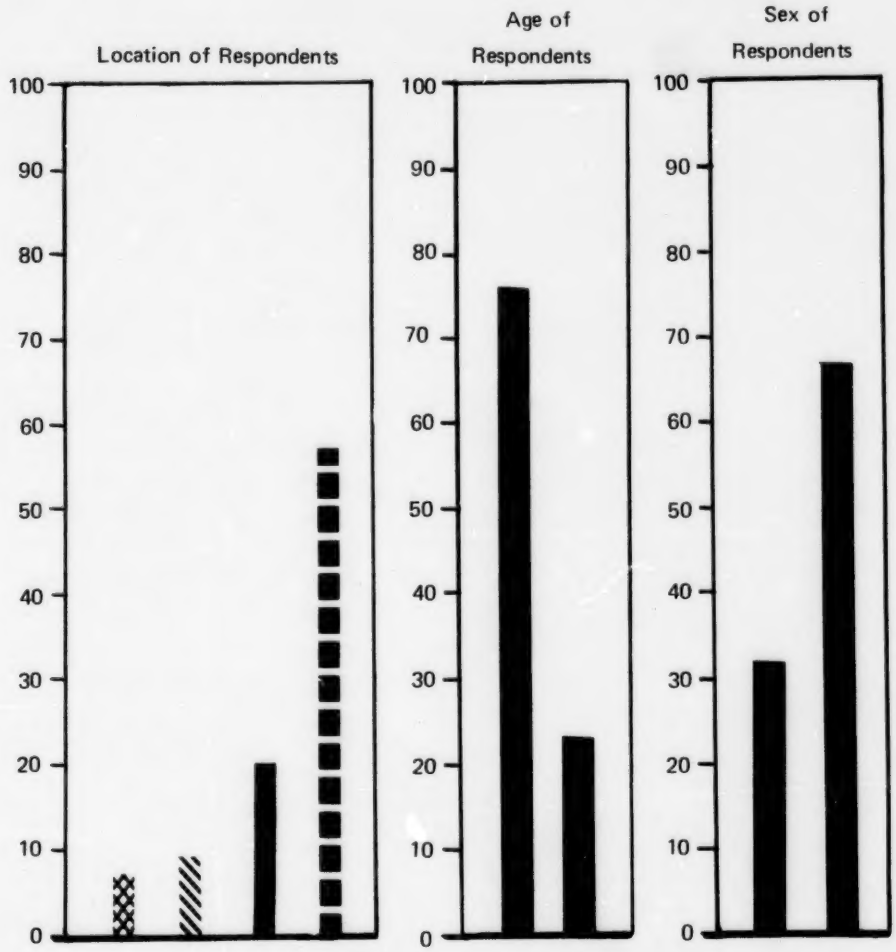
The following graphs are based on a sample of 3309. A copy of our community check list follows the graphs.

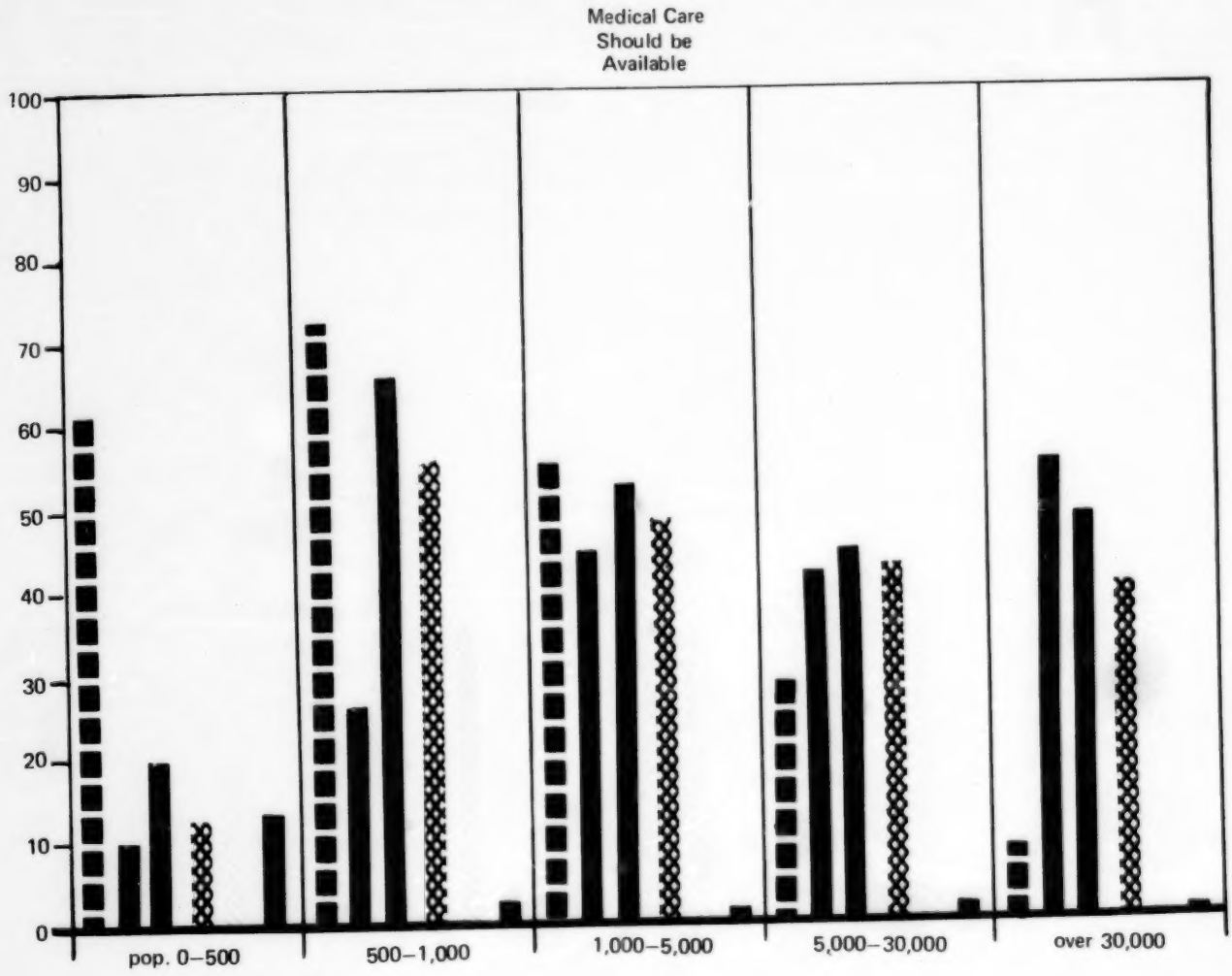

Location
of
Respondents
100
90
80
70
60
50
40
30
20
10
0
pop. o–500
1,000–5,000
500–1,000
5,000–30,000
over 30,000
Rural
Village
Town
City

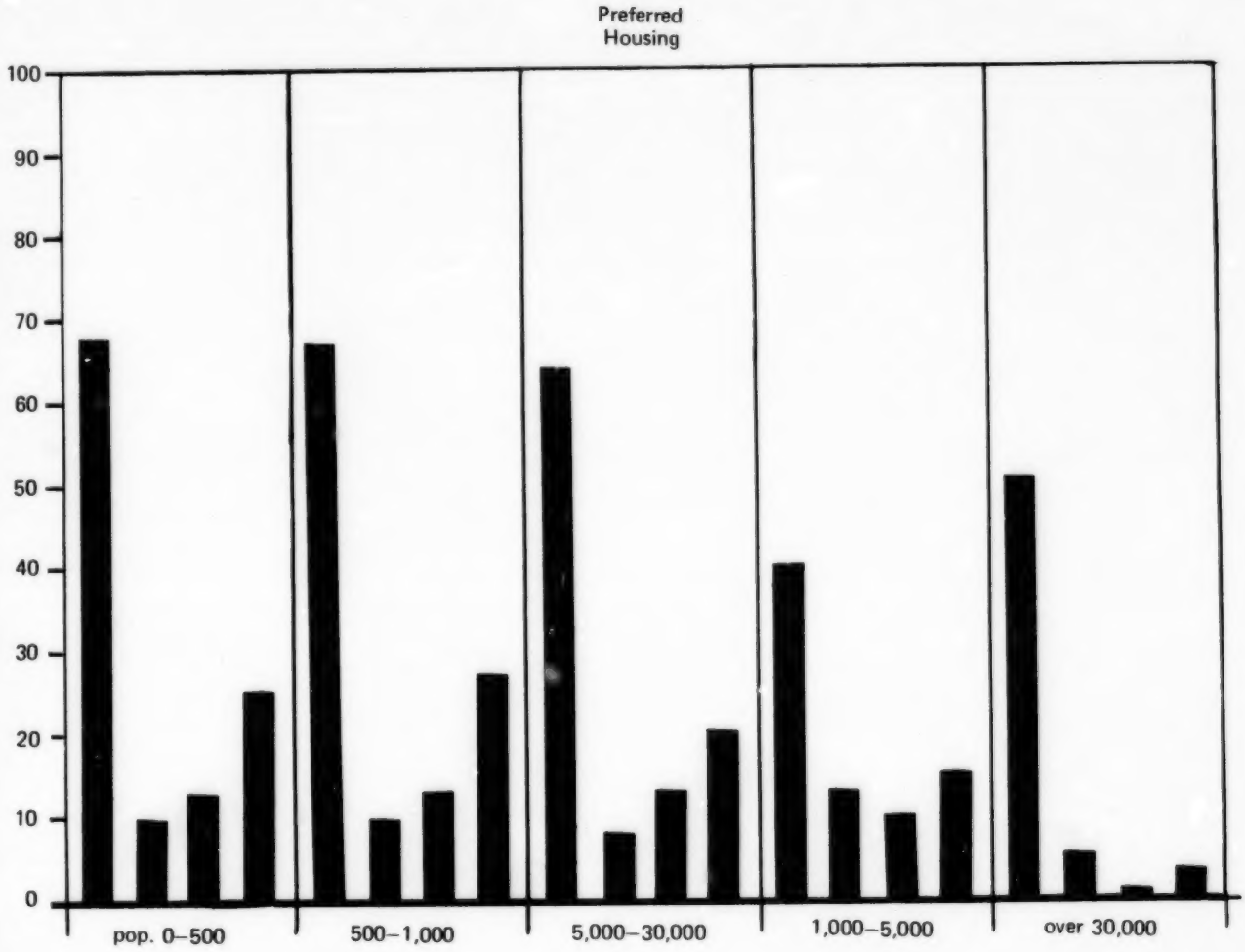

Age of
Respondents
100
90
80
70
60
50
40
30
20
10
0
pop. 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
Over 60
Under 60


Sex of
Respondents
100
90
80
70
60
50
40
30
20
10
0
pop. 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
Male
Female

Overall–22 Locations




Medical Care
Should be
Available
100
90
80
70
60
50
40
30
20
10
0
pop. 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
Special Care Home
Local
Elsewhere
Extended Care Inst.
Local
Elsewhere
Hospital
Local
Elsewhere

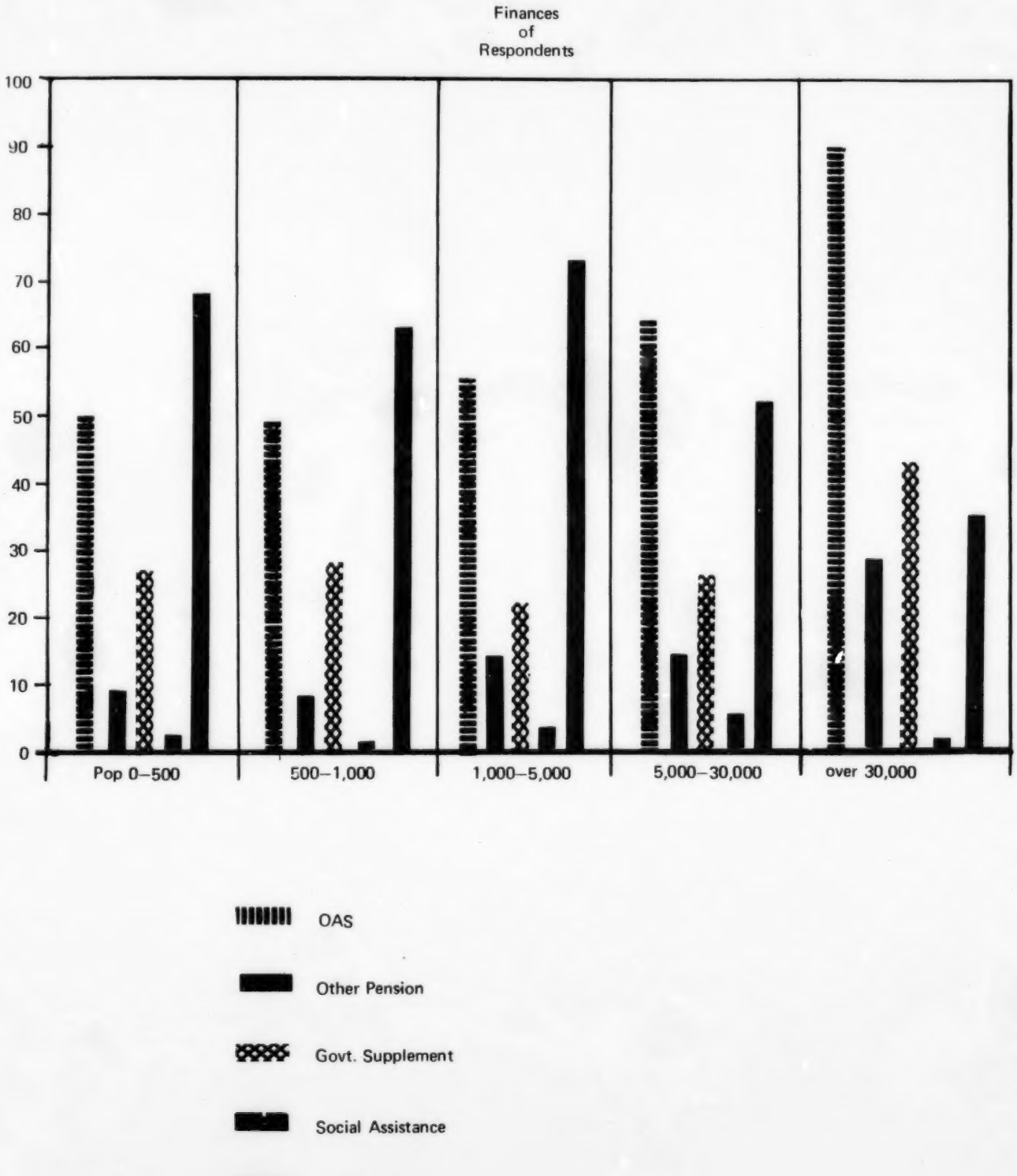


Private Home

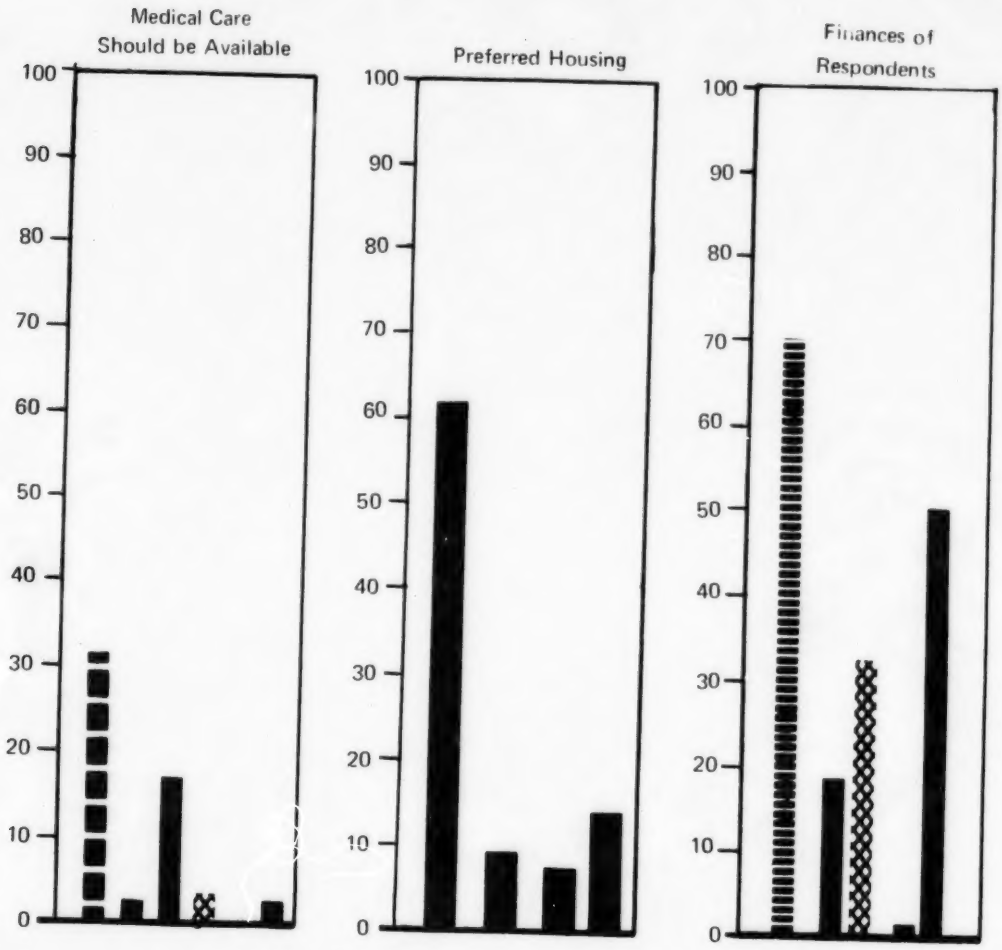
Single Self-contained

Double Self-contained

Special Care Inst.


Finances
of
Respondents
100
90
80
70
60
50
40
30
20
10
0
Pop 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
OAS
Other Pension
Govt. Supplement
Social Assistance
Other Income

Overall—22 Locations



Special Care Home
- Local
- Elsewhere

Extended Care Inst.
- Local
- Elsewhere

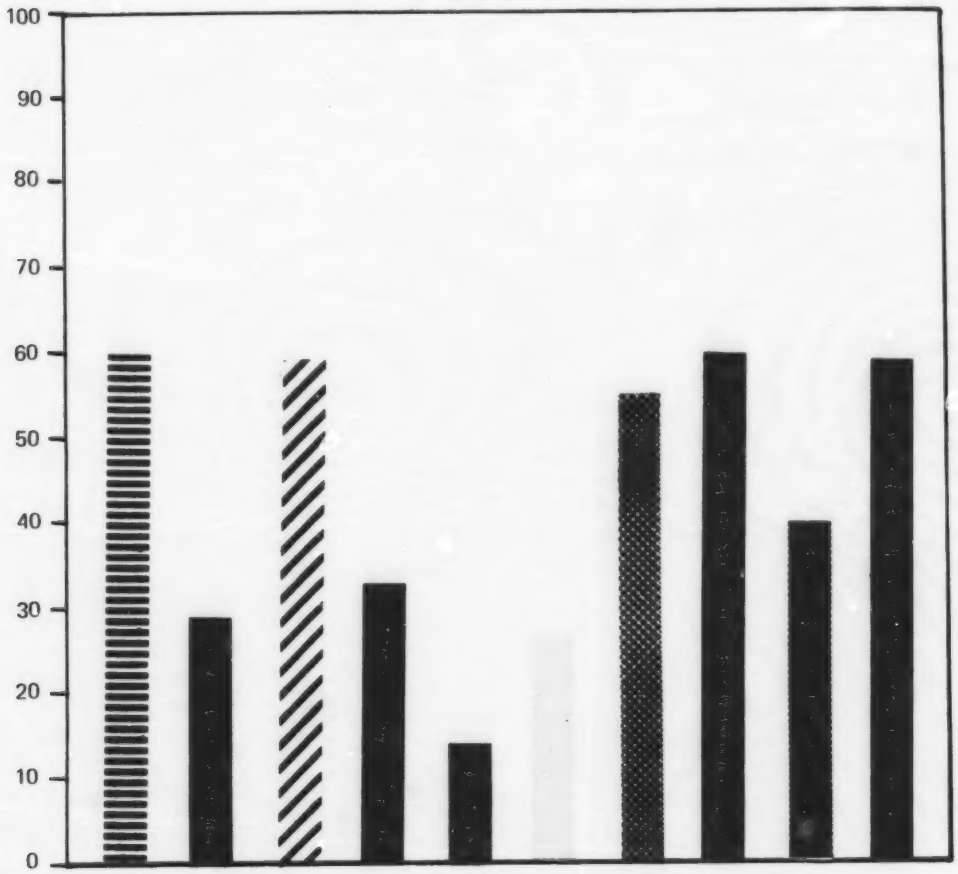
Hospital
- Local
- Elsewhere

- Private Home
- Single Self-Contained Unit
- Double Self-Contained Unit
- Special Care Facility

- OAS
- Other Pension
- Govt. Supplement
- Social Assistance
- Other Income

Required Community Services

Pop. 0–500



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Conselling

Day Care Service

Activity Centre

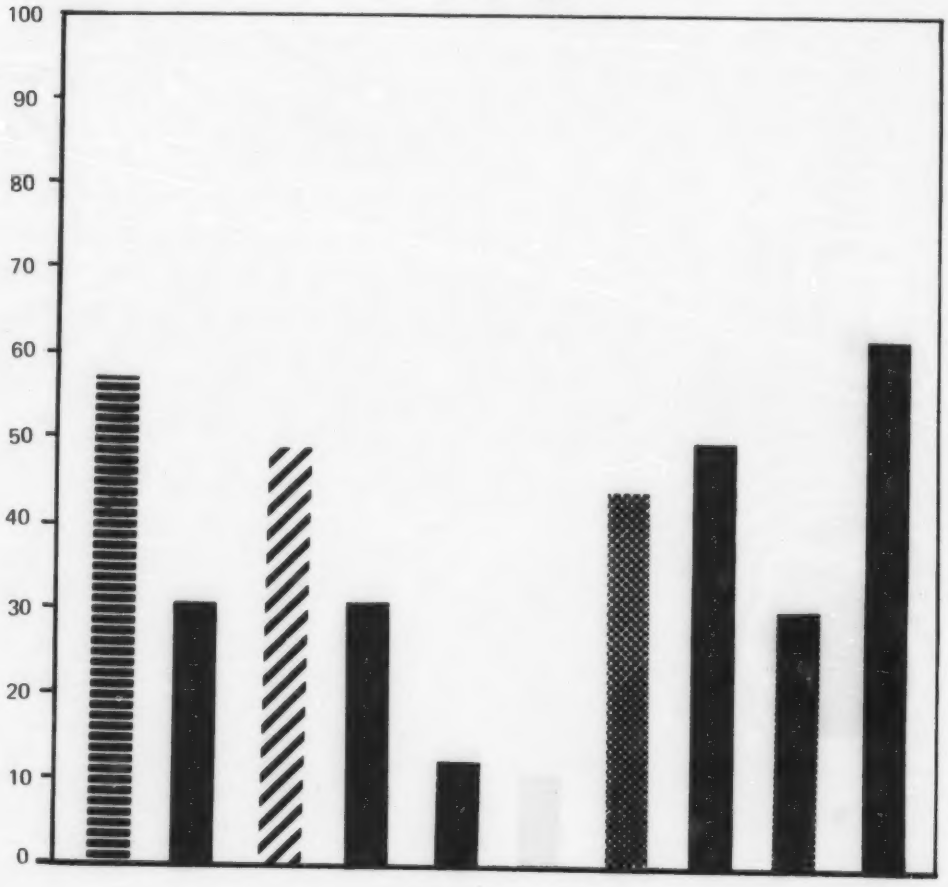
Homemaker Service

Home Improvement

Recreation Services

Required Community Services

pop. 500–1,000



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Counselling

Day Care Service

Activity Centre

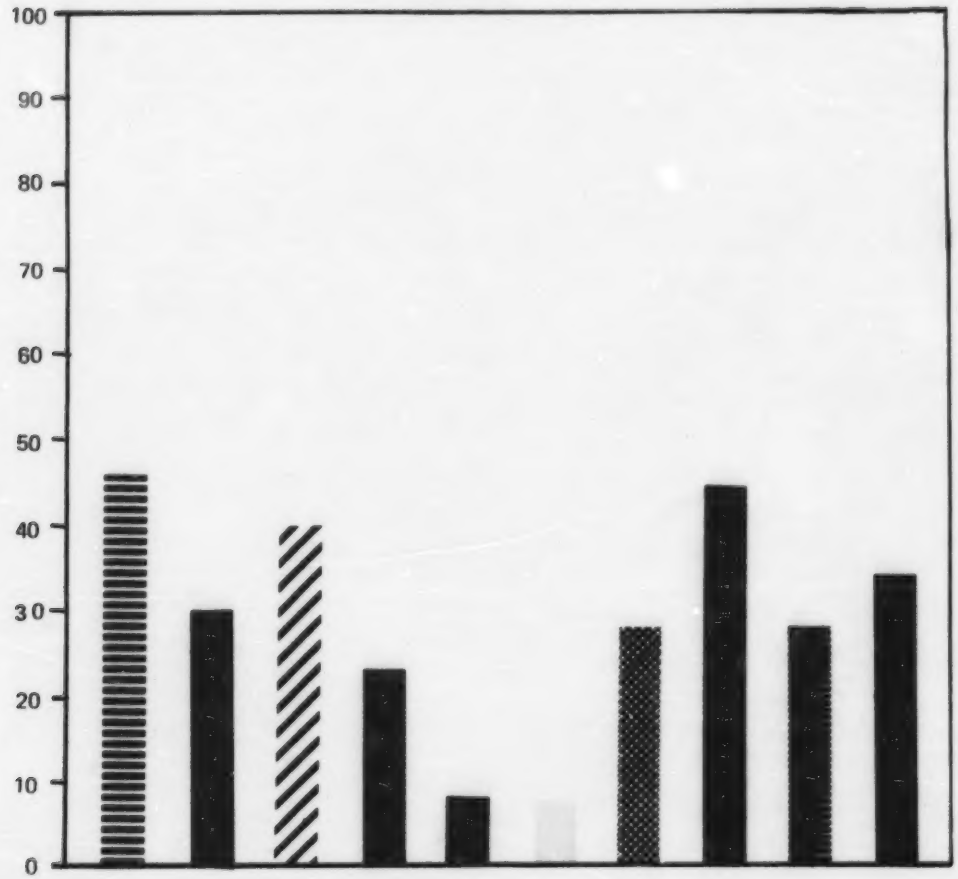
Homemaker Service

Home Improvement

Recreation Services

Required Community Services

pop. 1,000–5,000



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Counselling

Day Care Service

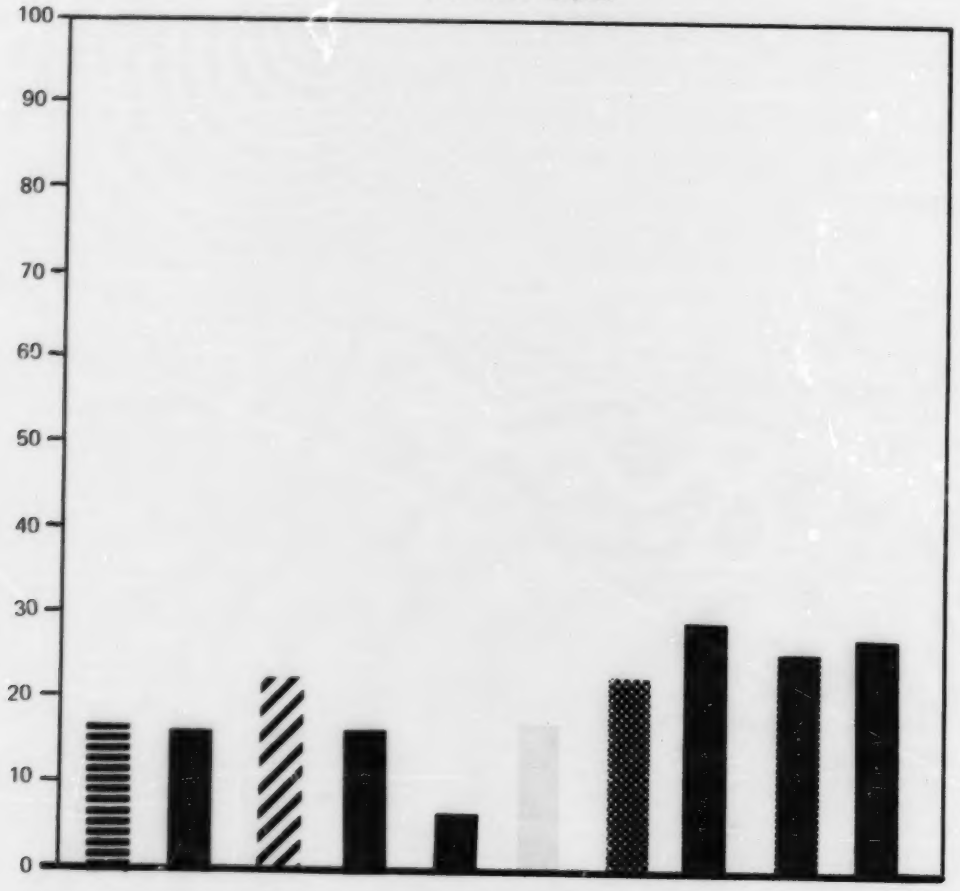
Activity Centre

Homemaker Service

Home Improvement

Recreation Services

Required Community Services
pop. 5,000–30,000



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Counselling

Day Care Service

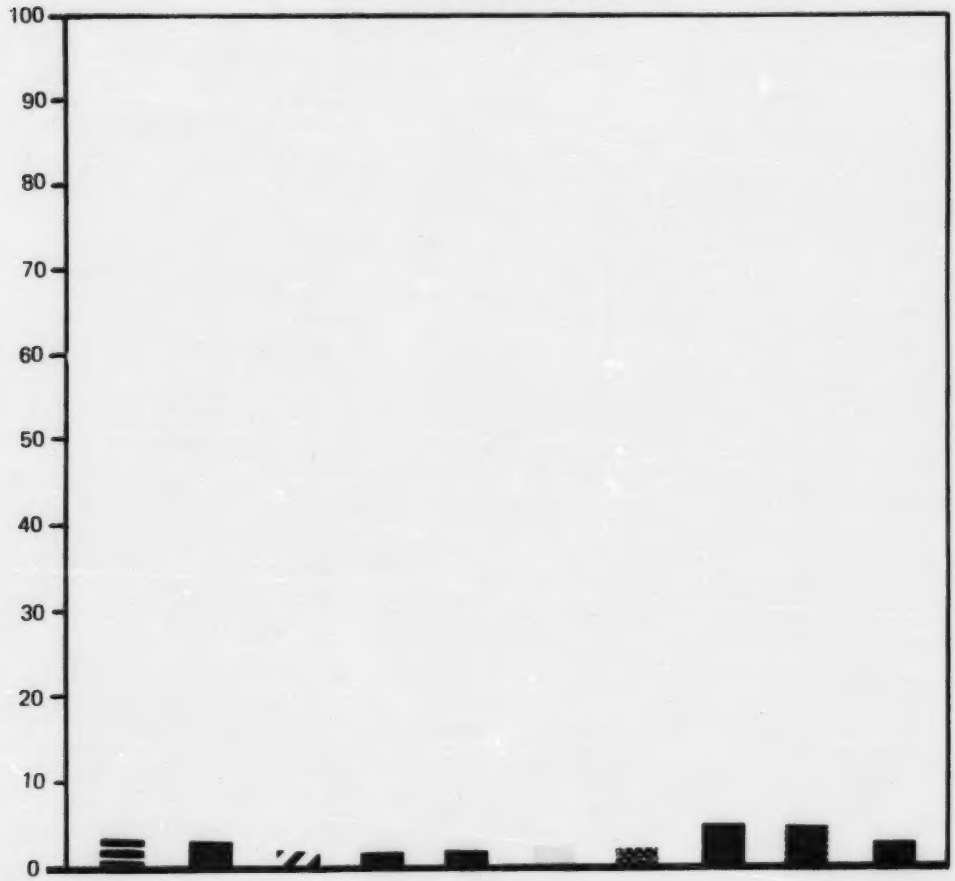
Activity Centre

Homemaker Service

Home Improvement

Recreation Services

Required Community Services
pop. over 30,000



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Counselling

Day Care Services

Activity Centre

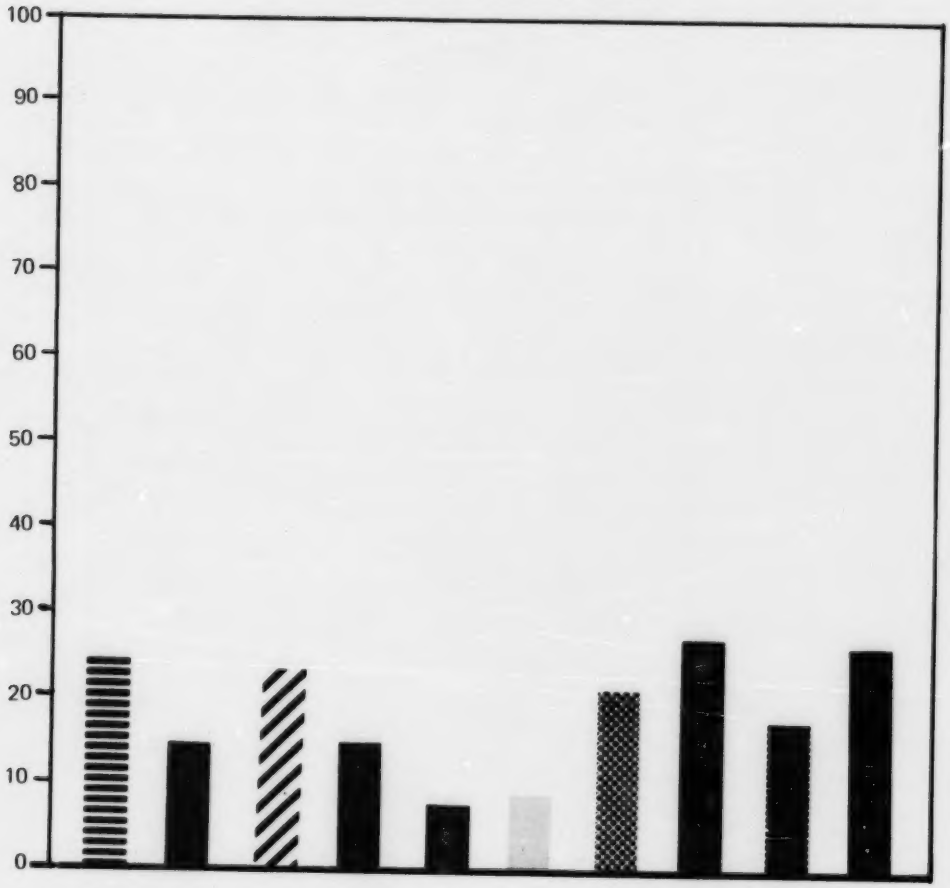
Homemaker Service

Home Improvement

Recreation Services

Overall–22 Locations

Required Community Services



Meals on Wheels

Phone Call A Day

Nursing Services

Personal Contact

Pre-Retirement Counselling

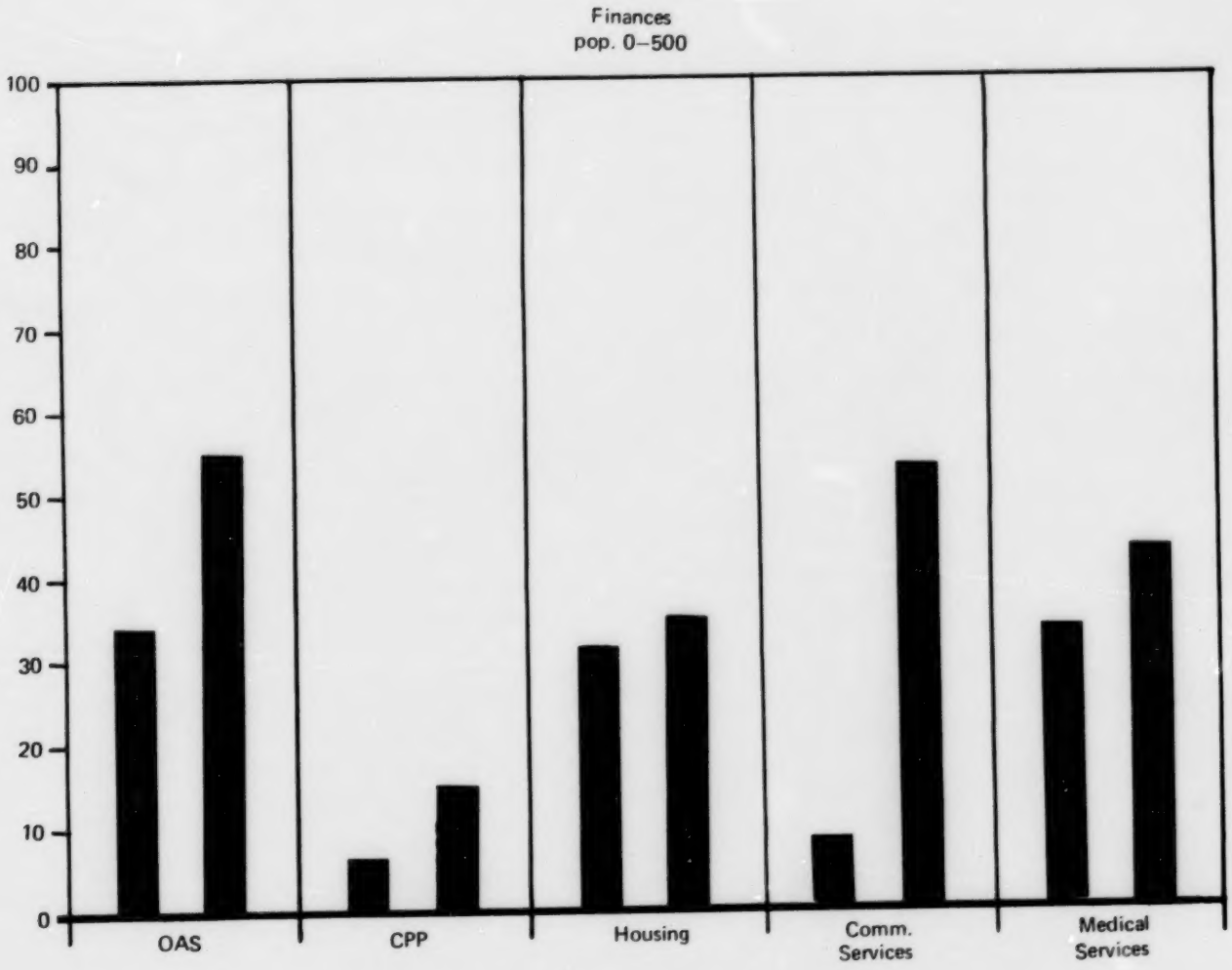
Day Care Service

Activity Centre

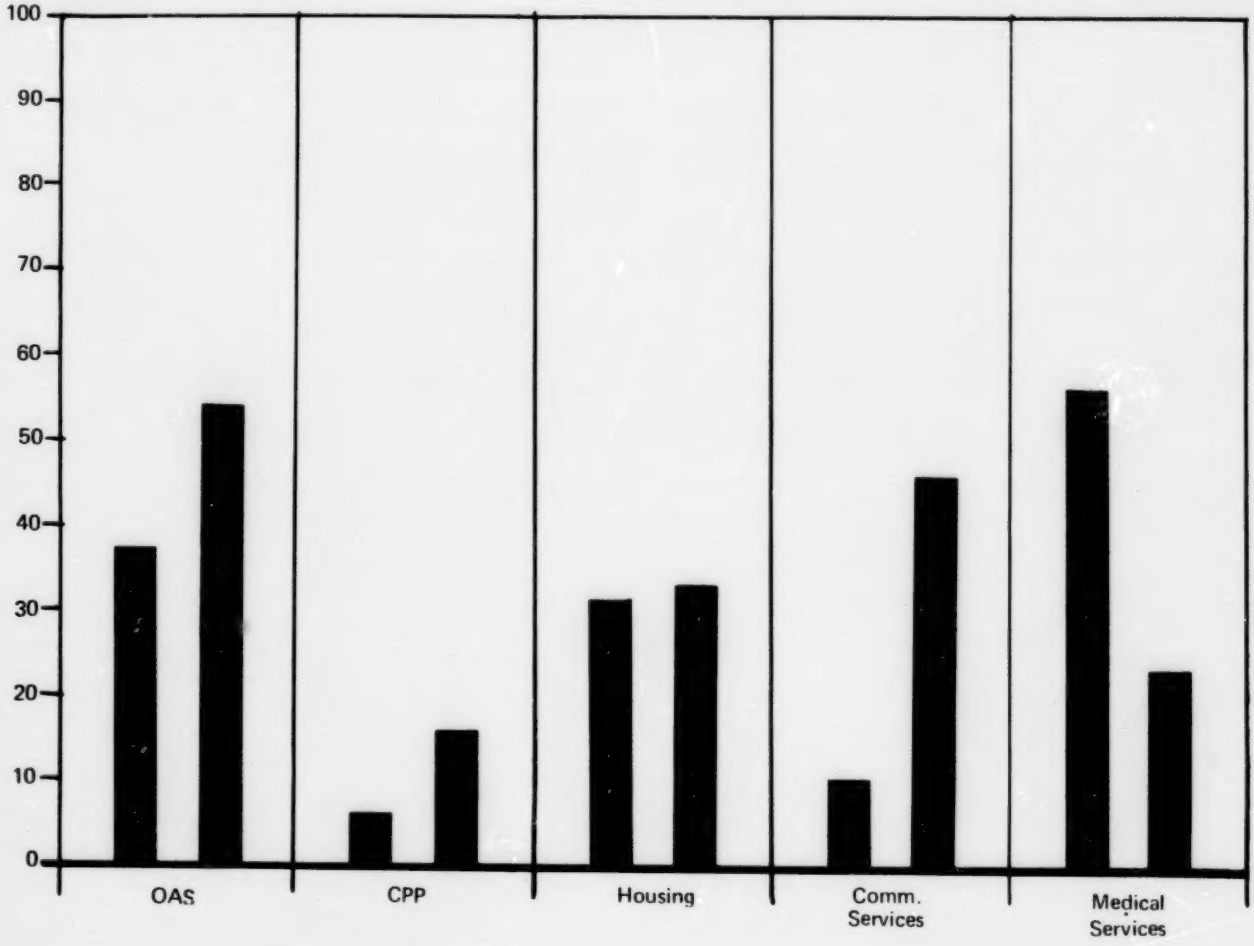
Homemaker Service

Home Improvement

Recreation Services


Finances
pop. 0–500
100
90
80
70
60
50
40
30
20
10
0
OAS
CPP
Housing
Comm. Services
Medical Services
Adequate
Inadequate

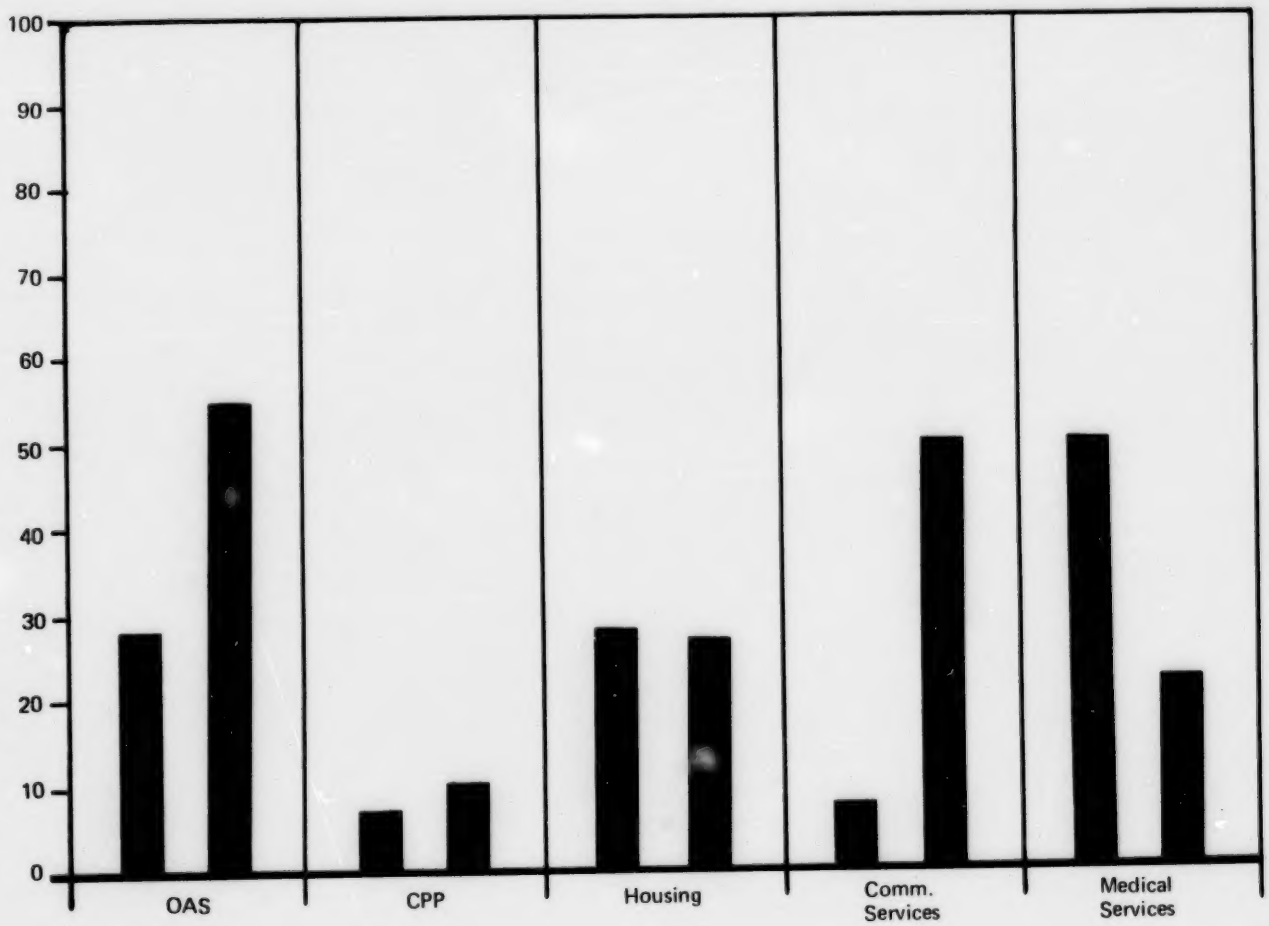
Finances
pop. 500–1,000



Adequate

Inadequate

Finances
pop. 1,000–5,000

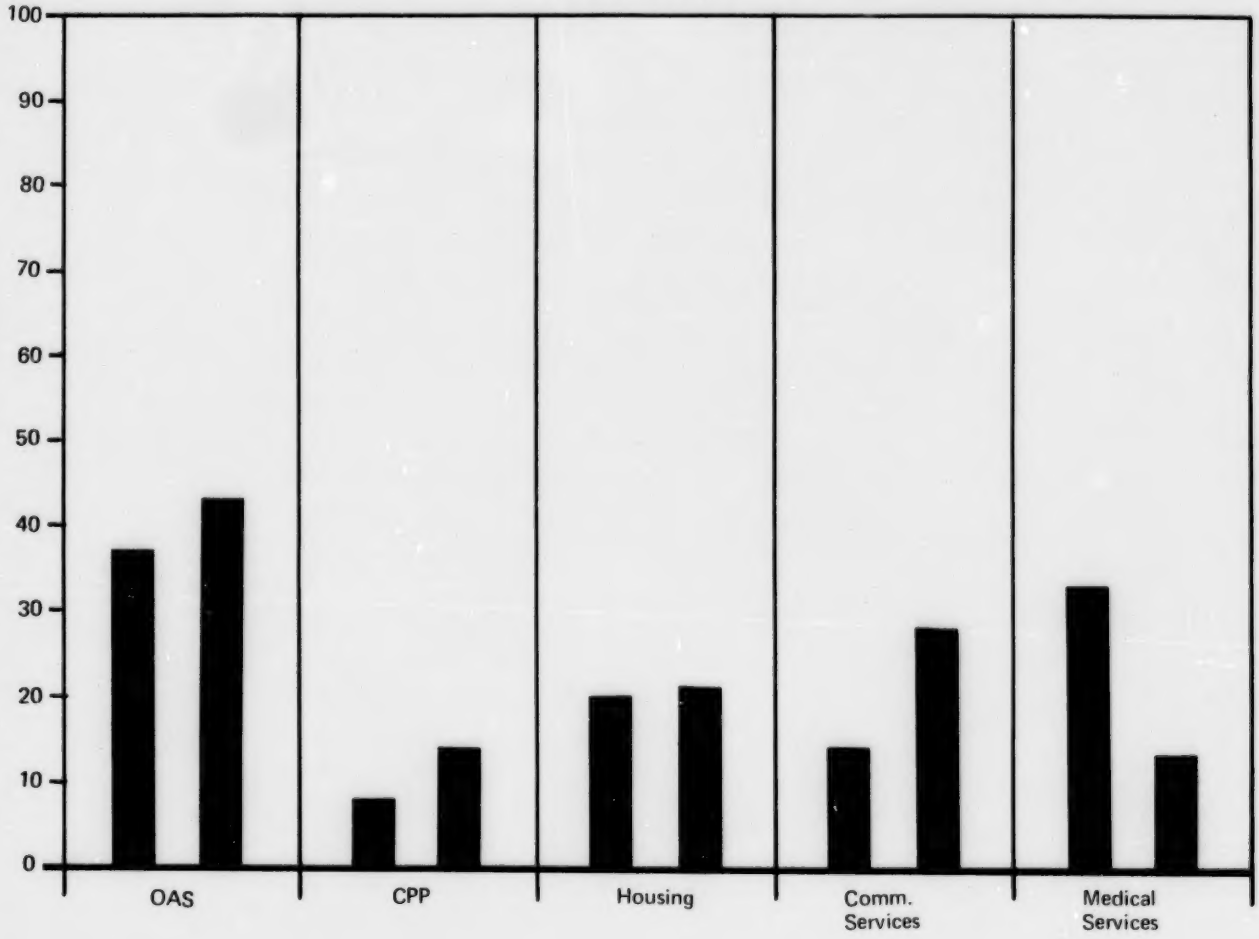


Adequate

Inadequate

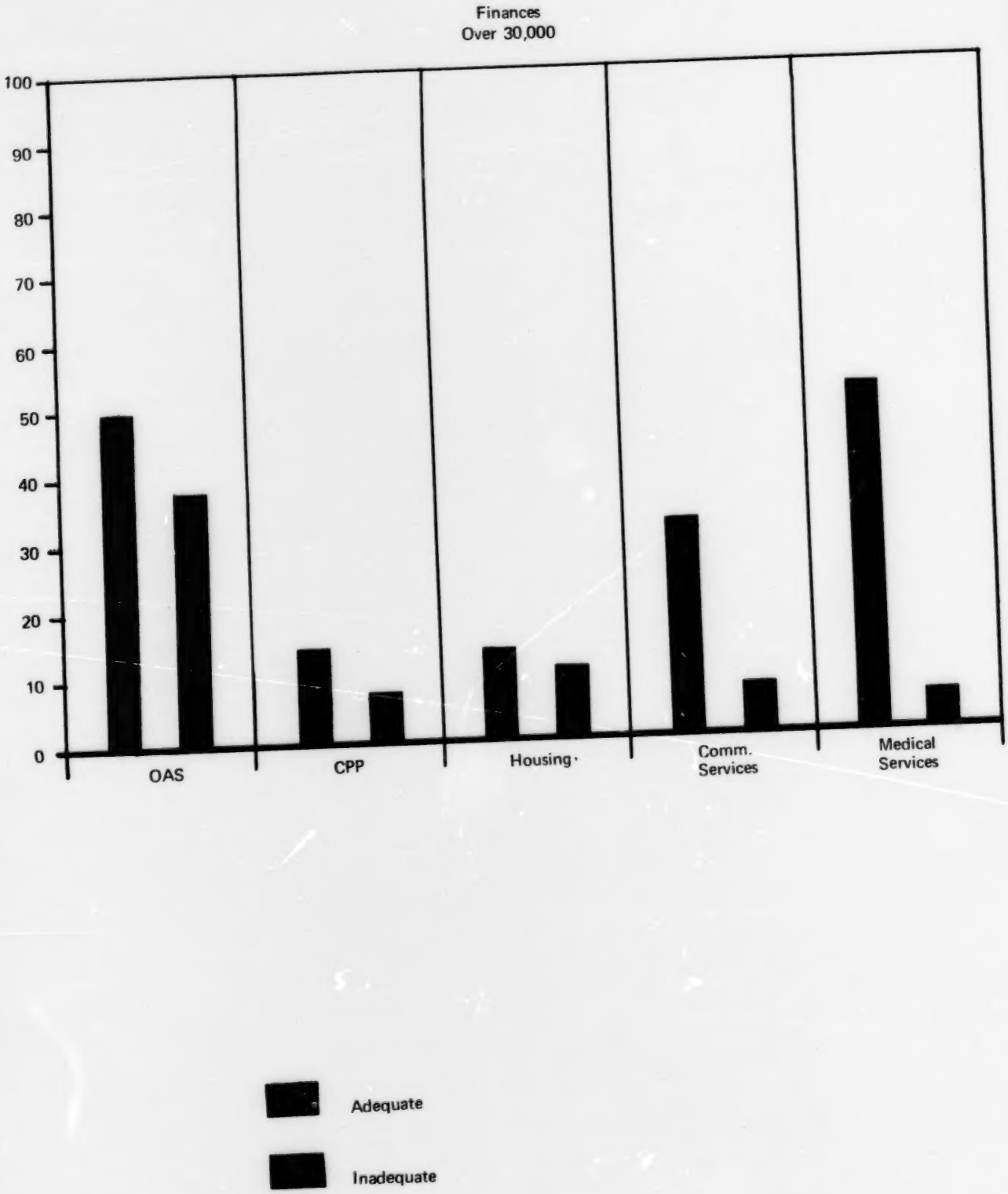
Finances

pop. 5,000–30,000



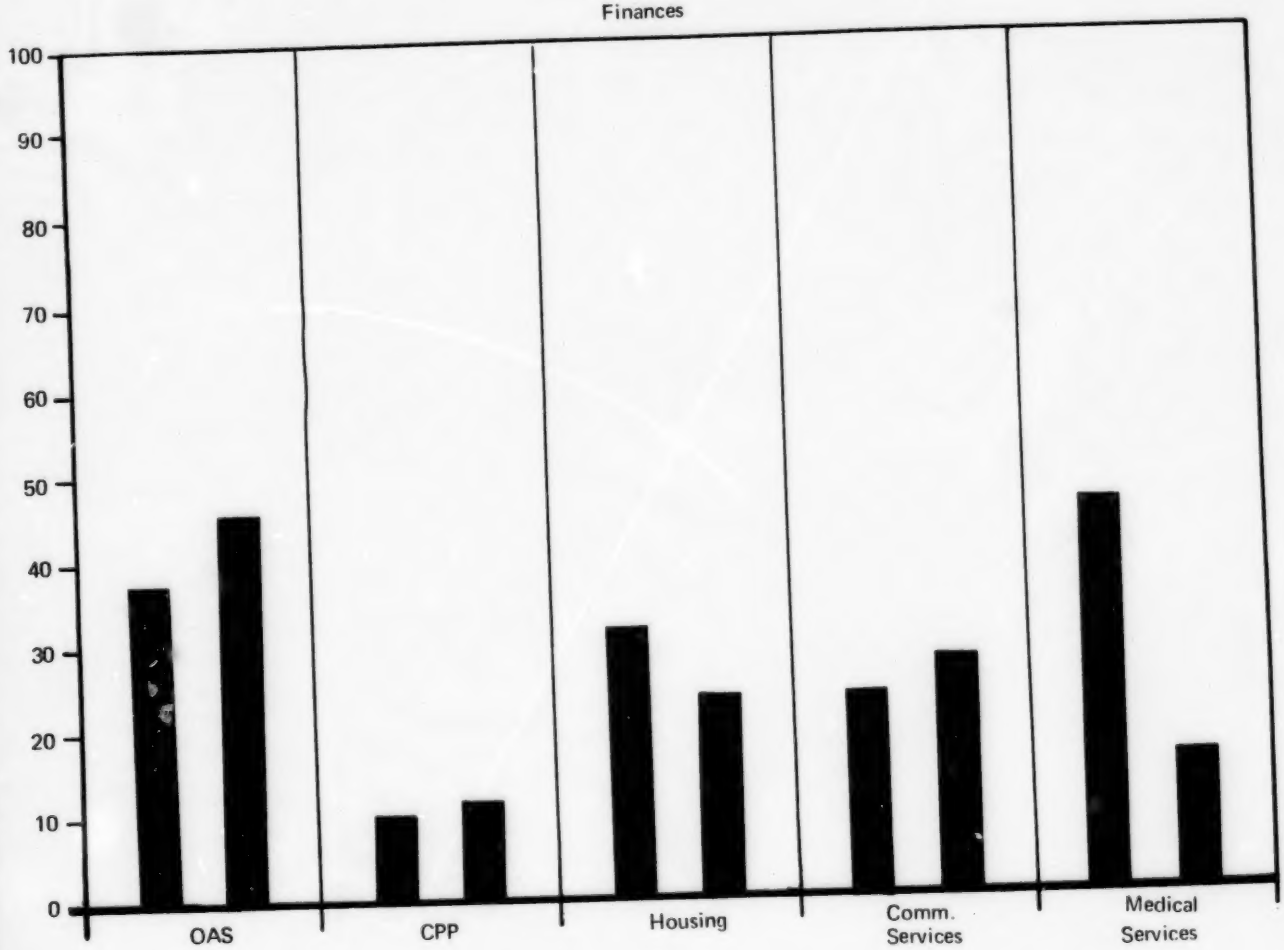
Adequate

Inadequate


Finances
Over 30,000
100
90
80
70
60
50
40
30
20
10
0
OAS
CPP
Housing
Comm. Services
Medical Services
Adequate
Inadequate

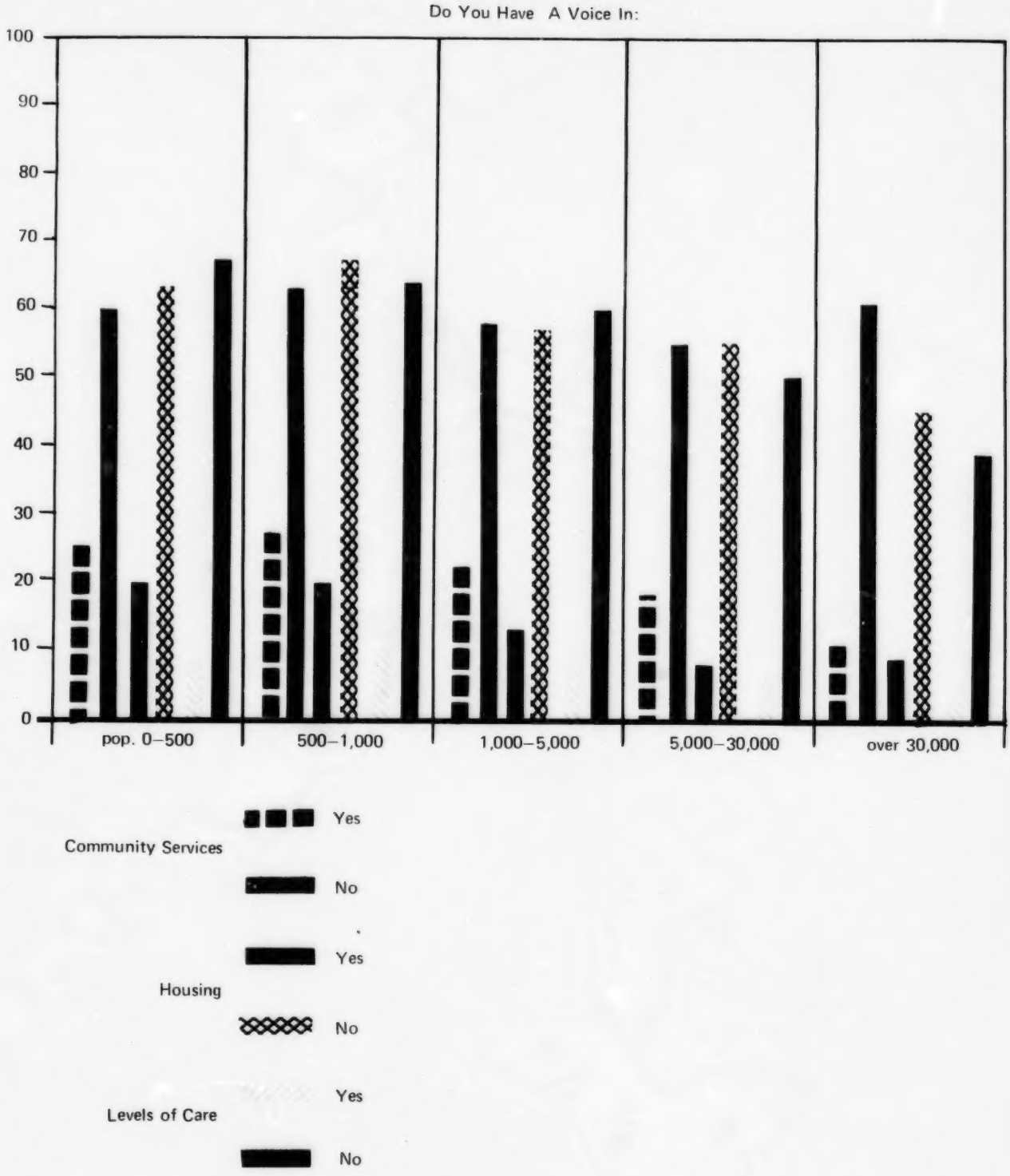
Overall—22 Locations

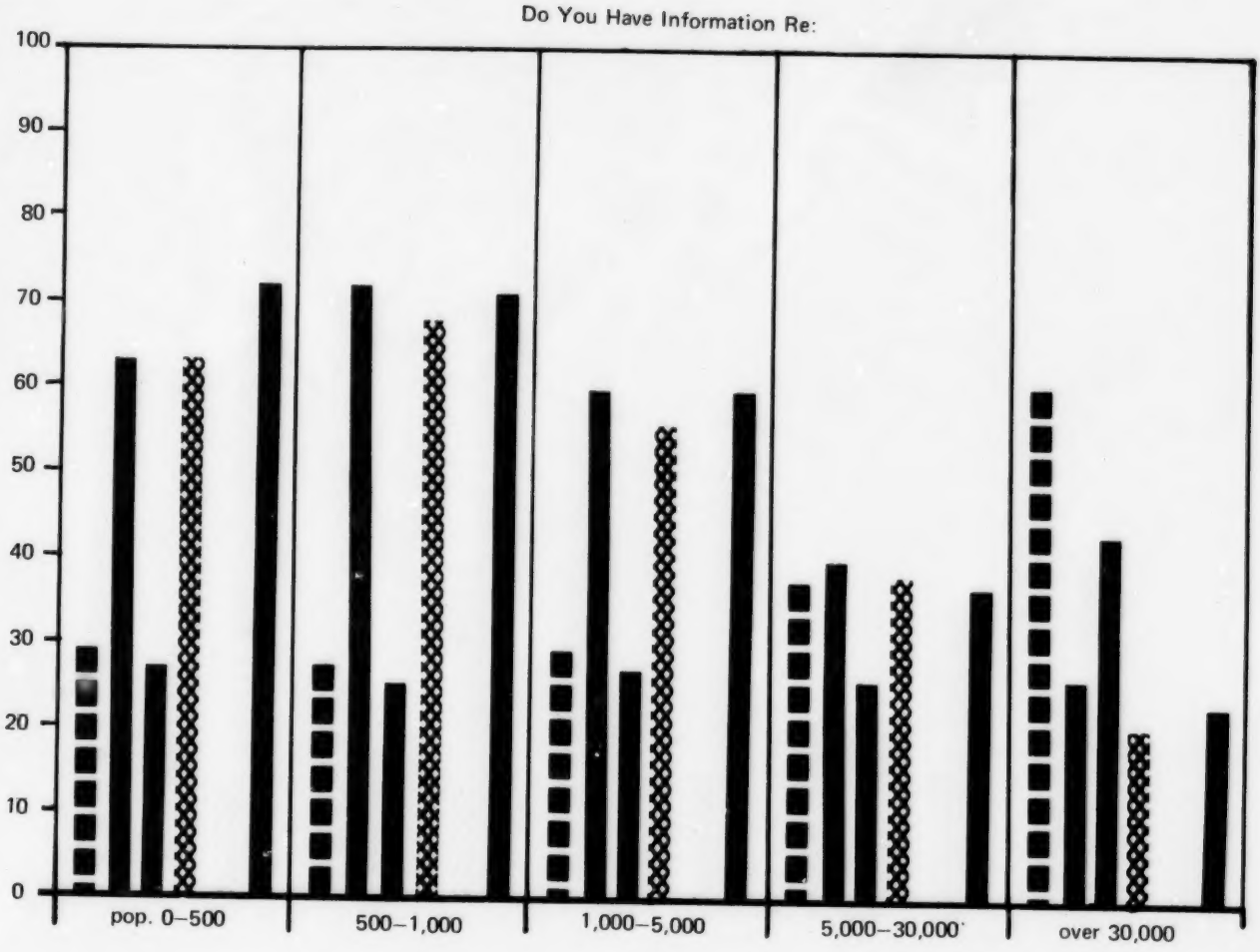
Finances



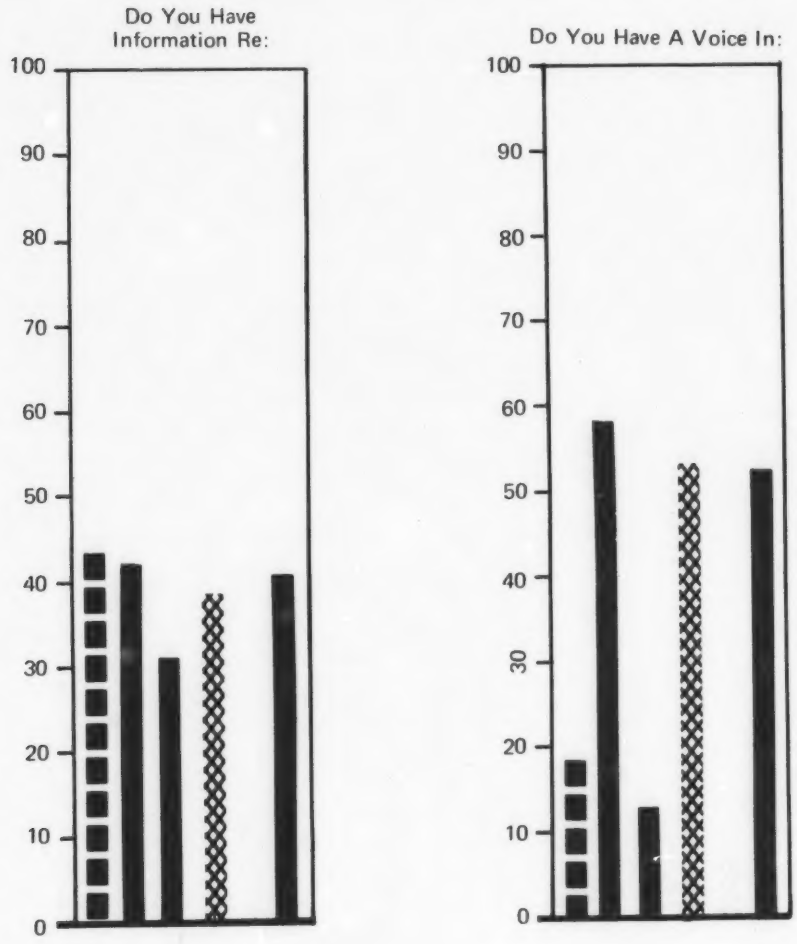
Adequate

Inadequate


Do You Have A Voice In:
100
90
80
70
60
50
40
30
20
10
0
pop. 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
Yes
Community Services
No
Yes
Housing
No
Yes
Levels of Care
No


Do You Have Information Re:
100
90
80
70
60
50
40
30
20
10
0
pop. 0–500
500–1,000
1,000–5,000
5,000–30,000
over 30,000
Community Services
Yes
No
Housing
Yes
No
Levels of Care
Yes
No

Overall–22 Locations



AGE

i. Over 60 ☐

ii. Under 60 ☐

SEX

i. Male

(a) single ☐
(b) married ☐

ii. Female

(a) single ☐
(b) married ☐

LOCATION

i. Rural ☐

ii. Village ☐

iii. Town ☐

iv. City ☐

FINANCES

i. Income

(a) OAS Pension ☐
(b) Other pension ☐
(c) Gov't Supplement ☐
(d) U.I.C. ☐
(e) Social Assistance ☐
(f) Other income ☐

ii. No Comment ☐

INFORMATION TAKEN BY:

(1) phone ☐
(2) home visit ☐
(3) other ☐

HOUSING

i. House

	Pres.	Preferred
(a) private home		
(b) L.H.K. suite		
(c) with family.		

ii. Apartment

	Pres.	Preferred
(a) tri-level (mixed age)		
(b) high rise (mixed age)		
(c) tri-level (Senior Citizens)		
(d) high rise (Senior Citizens)		
(e) other apartments.		

	Pres.	Preferred
iii. Condominium		
iv. Duplex (Quadraplex, etc.)		

v. Shared Accommodation

	Pres.	Pref.
(a) house		
(b) apartment.		

vi. Self-Contained Units

	Pres.	Preferred
(a) single		
(b) double		

vii. Special-Care Homes

	Pres.	Preferred
(a) institutions		
(b) private houses offering special care		

viii. Other dwellings

	Pres.	Preferred
(a) hotels, motels		
(b) boarding houses		
(c) hostels		
(d) mobile homes.		

FINANCIAL ARRANGEMENTS

	Present	Preferred
i. Private ownership		
ii. rental arrangement		
(a) shared rent		
(b) low rental		
(c) subsidized		
(d) no rent.		
iii. Shared ownership		

COMMUNITY SERVICES

	Avail.	Req.
i. Meal Services		
(a) Meals on Wheels		
(b) Dial-A-Dietitian		
ii. Phone-Call-A-Day		
iii. Nursing Services		
iv. Personal Contact		
v. Counselling		
(a) pre-retirement		
(b) other		
vi. Day Care Service		
vii. Activity Centre		
viii. Homemaker Service		
ix. Home Improvement		
x. Transportation		
(a) bus		
(b) car		
(c) ambulance		
(d) taxi		
(e) reduced rate		
(i) bus		
(ii) taxi		

	Avail.	Req.
xi. Recreation Services		
xii. Library Services		
(a) Centrally located		
(b) mobile		
(c) ethnic services		
(d) handicap services		
Medical		
xiii. Dental Services		
xiv. Drug services		
xv. Hearing-Aid services		
xvi. Rehabilitation Services		
xvii. Preventive Health Education		
xviii. Doctors Services.		

LEVELS OF CARE

A. COMPLAINTS:

i. Transfer of patients ☐

ii. Patients basic needs

(a) physical ☐
(b) social ☐
(c) financial ☐

iii. Levels of Care Appeals Committee ☐

iv. Inflexibility of the services

(a) hospital ☐
(b) extended care (4-6) ☐
(c) special care (1-3) ☐

B. SHOULD BE AVAILABLE:

	Local	Elsewhere
i. Special Care Home	☐	☐
ii. Extended Care Institute	☐	☐
iii. Hospital	☐	☐

C. SUGGESTIONS:

i. Insured service for levels 1, 2, 3 ☐

ii. Evaluation needed concerning:

(a) bed quota ☐
(b) service area ☐
(c) institutional regulations ☐
(d) eligibility ☐
(e) medical professionals ☐
(f) para-medical professionals ☐
(g) administration ☐
(h) other services ☐

D. FINANCES:

Adequate	Inadequate
☐	☐

DO YOU HAVE INFORMATION RE:

(1) Community Services
(2) Housing
(3) Level 4

DO YOU HAVE A VOICE IN:

	Yes	No	Unknown
(1) Community Services			
(2) Housing			
(3) Level 4			

FINANCES:

	Adequate	Inadequate
O.A.S.		
C.P.P.		
HOUSING		
COMMUNITY SERVICES		
MEDICAL SERVICES		

Briefs

BRIEFS

1. *Alliance of Youth and the Elderly Society, 134 Avenue "F" South, Saskatoon.*
2. *Catholic Women's League, c/o Mrs. G. T. Molloy, Provincial Social Action Convenor, 615 Idylwyld Crescent, Saskatoon.*
3. *Central Haven Steering Committee, c/o Walter Siemens, Chairman, Box 1311, Saskatoon.*
4. *Church in Society Committee, Saskatoon Presbytery, Saskatoon.*
5. *College of Dental Surgeons, c/o Dr. Ron Hill, 811 – 21st Street East, Saskatoon.*
6. *Committee on Unmet Social Needs in Unity and District, Unity.*
7. *Community Clinic, 455 Second Avenue North, Saskatoon.*
8. *Community Grants and Standards Division, Department of Social Services, 2240 Albert Street, Regina.*
9. *Community Planning Association, Saskatchewan Division, 202 – 1808 Smith Street, Regina.*
10. *Community Switchboard, 2641 Garnet Street, Regina.*
11. *Council on Aging, c/o Lutheran Theological Seminary, 224 Seminary Crescent, Saskatoon.*
12. *El Amarillo Stables, Regina.*
13. *Family Service Bureau, No. 20 309 – 22nd Street East, Saskatoon.*
14. *F.I.S.H., Swift Current.*
15. *Gray; James, 43 McAskill Crescent, Saskatoon.*
16. *Griffiths; Peter, 622 – 15th Street West, Prince Albert.*
17. *Holy Family Hospital, 675 – 15th Street West, Prince Albert.*
18. *Hughes-Caley; M, 424 – 25th Street East, Prince Albert.*
19. *Human Resources Development Agency, 1820 Albert Street, 3rd Floor, Regina.*
20. *Humboldt Senior Citizens, Box 415, Humboldt.*
21. *Inner City Council of Churches, c/o Reverend R. Davidson, St. Andrew's Presbyterian Church, Spadina Crescent, Saskatoon.*
22. *Interdenominational Group, c/o Mrs. Marion Read, Govan.*
23. *Jubilee Residences Limited, Mount Royal Lodge, Avenue P at 30th Street, Saskatoon.*
24. *Lasburn Senior Citizens Association, c/o Allan Craig, Lashburn.*
25. *Leask & District Senior Citizens Branch 69, Leask.*
26. *Ministry of Outreach and Social Action, Knox-Metropolitan United Church, Regina.*

27. *New Horizons, c/o J. L. Phelps, 207 – 29th Street West, Saskatoon.*

28. *Pensioners and Senior Citizens Organization of Saskatchewan, 257 Hanley Crescent, Regina.*

29. *Pensioners and Senior Citizens Organization, c/o Earl Kyle, Secretary, Swift Current.*

30. *Pensioners and Pioneers Organization, c/o Joseph A. Thain, 701 – 11th Street East, Saskatoon.*

31. *Pine Tree Heritage Advancement Club, Christopher Lake, Saskatchewan.*

32. *Prince Albert Home Care Program, c/o Victoria Union Hospital, Prince Albert.*

33. *Prince Albert Regional Office, Department of Social Services, 196 – 9th Street East, Prince Albert.*

34. *Public Health; Department of – Psychiatric Centre, Victoria Union Hospital, 1200 – 24th Street West, Prince Albert.*

35. *Public Health; Department of – c/o Ms. Ruth Dafoe, Medical Social Worker, Provincial Health Building, Regina.*

36. *St. James United Church, 4506 Sherwood Drive, Regina.*

37. *Regina Council of Women, c/o Mrs. Mary Entwistle, Chairman, No. 5, 2250 – 7th Avenue North, Regina.*

38. *Regina Local Housing Authority, 2153 Lorne Street, Regina.*

39. *Regina Pioneer Village Ltd., 430 Pioneer Drive, Regina.*

40. *Regina Rural Health Region, Department of Public Health, Golden Mile Plaza, Regina.*

41. *Royal Canadian Legion, 1836 Cornwall Street, Regina.*

42. *St. Stephen's (Anglican) Church, 10 Grosvenor Crescent, Saskatoon.*

43. *Salvation Army Eventide Home, 2221 Adelaide St. E., Saskatoon.*

44. *Saskatchewan Action Committee for the Status of Women, c/o Linda Tate, 2900 Argyle Street, Regina.*

45. *Saskatchewan Association of Housing and Nursing Homes, No. 200, 2505 – 11th Avenue, Regina.*

46. *Saskatchewan Federation of Labour, Canadian Labour Congress, Room 105, 2709 – 12th Avenue, Regina.*

47. *Saskatchewan Safety Council, 2149 Albert Street, Regina.*

48. *Saskatoon Board of Trade, Bessborough Hotel, Saskatoon.*

49. *Saskatoon; City of – c/o City Hall, Saskatoon.*

50. *Saskatoon Convalescent Home, 101 – 31st Street West, Saskatoon.*

51. *Saskatoon Young Women's Association Program Committee, 3rd Avenue and 24th Street, Saskatoon.*

52. *Senior Citizens Assistance Plan* **(S.C.A.P.)**, *705 Caribou West, Moose Jaw.*

53. *Senior Citizen's Day Centre, 2412 – 11th Avenue, Regina.*

54. *Senior Citizen's Day Centre, 2412 – 11th Avenue, Regina. c/o Russell McKenzie Leader, Senior Citizens Discussion Group.*

55. *Senior Citizens Service, 1075 Albert Street, Regina.*

56. *Shaw; Mervyn, 629 – 7th Street East, Saskatoon.*

57. *Sherbrooke Staff Nursing Association, c/o Mrs. Fluter, 48 Walker Crescent, Saskatoon.*

58. *Soroptomist Club of Regina, c/o Ms. J. M. Blake, President, 60 Turgeon Crescent, Regina.*

59. *South Saskatchewan Optometric Group of the Saskatchewan Optometric Association, c/o Dr. L. J. Kolton, 440 Midtown Centre, Regina.*

60. *Superannuated Teachers of Saskatchewan, 2330 Albert Avenue, Saskatoon.*

61. *United Church of Canada, Saskatchewan Conference, No. 2, 1805 Rae Street, Regina.*

62. *United Church Women, Regina Presbyterial of the United Church of Canada, c/o Miss C. G. Aitchison, Secretary, 2720 Victoria Avenue, Regina.*

63. *United Church Women, Saskatoon Presbyterial, c/o Ms. Grace Milne, No. 20, 2112 St. Cecilia Avenue, Saskatoon.*

64. *Victoria Union Hospital, 1200 – 24th Street West, Prince Albert.*

65. *Watson Union Hospital Board of Trustees, Watson, Saskatchewan.*

66. *Weaver; N.E., Box 563, Carlyle, Saskatchewan.*

Bibliography

ADAMS, CAMERON, HILL, PENZ. The Real Poverty Report. M. G. Hurtig Limited, Edmonton, 1971.

AGED AND LONG-TERM ILLNESS SURVEY COMMITTEE. Report and Recommendations. Province of Saskatchewan, July, 1963.

AGED AND LONG-TERM ILLNESS SURVEY COMMITTEE. Survey of Employers. Province of Saskatchewan, 1962.

AGED AND LONG-TERM ILLNESS SURVEY COMMITTEE. Information and Opinion Survey. Province of Saskatchewan, 1962.

AGED AND LONG-TERM ILLNESS SURVEY COMMITTEE. Survey of Aged Persons in Institutions. Province of Saskatchewan, 1962.

AGE AND OPPORTUNITY CENTRE INC. Annual Report – 1972. Province of Manitoba, Winnipeg, 1972.

BEATTY, G. H. Report of the Special Care Homes Program. Province of Saskatchewan, Committee on Special-Care Homes, 1971.

BELLEVILLE AND DISTRICT INC., United Community Services. Senior Citizens' Study – Survey Report. Province of Ontario, June, 1972.

BRUNELLE, Honourable Rene, Minister. Annual Report of the Minister, Department of Social and Family Services – 1971-72. Province of Ontario, year ending March 31, 1972.

BRUNET, Jacques. Norms for Day Centres. Province of Quebec, Ministry of Social Services, 1972.

CANADIAN CONFERENCE ON SOCIAL WELFARE. Retirement Policies and Aging. Province of Ontario, 1968. Canadian Welfare Council, 55 Parkdale Ave., Ottawa, February, 1969.

CANADIAN COUNCIL ON SOCIAL DEVELOPMENT. Beyond Shelter. A Study of N.H.A. – Financed Housing For the Elderly. July, 1973.

CANADIAN COUNCIL ON SOCIAL DEVELOPMENT. Homemaker Services. Financing, Training, Future; proceedings of a workshop at the Canadian Conference on Social Welfare, 1972, Laval University, Quebec, June 18-22, 1972. Pub. January, 1973.

CANADIAN COUNCIL ON SOCIAL DEVELOPMENT. The National Housing Act Amendments 1972. A Commentary by the Canadian Council on Social Development Housing Committee. 1972.

CANADIAN COUNCIL ON SOCIAL DEVELOPMENT. Project Information Exchange; An inventory of studies, briefs and social action projects.

CANADIAN WELFARE COUNCIL. The Aging in Canada, 1966. Prepared by the Committee on Aging of The Canadian Welfare Council, August, 1966.

CANADIAN COUNCIL ON SOCIAL DEVELOPMENT. Issues for Citizen Information Services. Report of a National Consultation on Community Information and Referral Services. Ottawa, Ontario.

CANADIAN WELFARE COUNCIL. Guidelines for the Purchase of Services. Ottawa, Ontario. August, 1969.

CASTONGUAY, Honourable Claude. Annual Report – 1971-72. Department of Social Affairs, Quebec, 1972.

CAUFFMAN, Joy. Inventory of Health Services. University of Southern California, Los Angeles, California, 1971.

CANADIAN MORTGAGE AND HOUSING CORPORATION. Housing the Elderly. Second edition, July, 1972.

CANADIAN MORTGAGE AND HOUSING CORPORATION. A survey of Social Policies and Research Priorities for Senior Citizens in Canada. Ottawa, October, 1972.

COCKE, Honourable Dennis. A New Direction – Now The Community Health Centre. A position paper presented to The Ministers Conference on the Needs of the Aging, March 13, 1973, Province of British Columbia.

COMFORT, Doctor Alex. Conquest of Aging. Copyright 1968 by University of Saskatchewan.

CONSUMERS' ASSOCIATION OF CANADA. A Community Information Network. 1968, Ottawa, Ontario.

CONSUMERS' ASSOCIATION OF CANADA. Information Centres: A Handbook for Canadian Communities. May, 1973.

CRAWFORD, Lawrence. Retirement: Preparation for Retirement. A selected bibliography and source book. Ontario Ministry of Community and Social Services, Toronto, Ontario. 1972.

CRAWFORD, Lawrence and MATLOW, Jean. Some Attitudes Towards Retirement Among Middle-Aged Employees. 1968. Ministry of Community and Social Services, Toronto, Ontario.

CRAWFORD, Lawrence and MATLOW, Jean. Long-Term Study of Aging – Some Findings on Health. Ontario Ministry of Community and Social Services, September 1972.

CRAWFORD, Lawrence, MATLOW, Jean and GALNA, Rhea. Measures of Leisure Time; Activities of Men in Their Early Fifties – Ontario Long-Term Study of Aging 1959 – 1978. June, 1972.

CRAWFORD, Lawrence and JARVIS, M. Special Program Grants and Supporting Briefs for Senior Citizens' Centres. Ontario Ministry of Community & Social Services, Toronto.

DE BEAUVOIR, Simone. The Coming of Age. G. P. Putnam's Sons, New York, 1972.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Care of the Elderly in Hospitals and Residential Homes. London, England, 1965.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Geriatric Services and the Care of the Chronic Sick. London, England, 1957.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Help for the Handicapped. London, England, 1972.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Aids to Improved Efficiency in the Local Health Services Deployment of Nursing Teams.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Help in the Home: Section 13 of the Health Services and Public Health Act, 1968.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Siting of Hospital Services for Geriatric Patients. London, England.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Local Authority Social Services in England. London, England.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Local Authority Social Services 10 Year Development Plans 1973-1983. London, England.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. National Health Service Psycho-Geriatric Assessment Units. London, England.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Services for Mental Illness Related to Old. London, England.

DEPARTMENT OF HEALTH AND SOCIAL SECURITY. Welfare of the Elderly. London, England.

DEPARTMENT OF NATIONAL HEALTH AND WELFARE. Research and Statistics Memo – Programs for the Aged in Europe: Selected Countries. Welfare Research Division, Research & Statistics Branch, July, 1971.

DEPARTMENT OF PUBLIC HEALTH. Regulations Respecting Nursing Homes. Province of Saskatchewan.

DEPARTMENT OF PUBLIC WELFARE. Welfare Services in Nova Scotia. Province of Nova Scotia, 1972.

DEPARTMENT OF PUBLIC WELFARE. Boarding Homes Act. Chapter 25, Revised Statutes of Nova Scotia, 1967.

DEPARTMENT OF PUBLIC WELFARE. Nursing Homes Act. Chapter 216, Revised Statutes of Nova Scotia, 1967.

DEPARTMENT OF SOCIAL SERVICES AND REHABILITATION. Annual Report. For the year ended March 31, 1972, St. John's, Newfoundland.

DEPARTMENT OF PUBLIC WELFARE. Regulations to Boarding Homes Act, 1965.

DEPARTMENT OF PUBLIC WELFARE. Senior Citizens Social Services Act. Chapter 16.

DEPARTMENT OF WELFARE. Housing and Special Care Homes Report No. 2. Program Division, Department of Welfare, Saskatchewan, February, 1969.

DONEGAN, E. A., Chairman, Conference on Aging. Challenge of Aging. Report of Southwest Saskatchewan Conference on Aging, March, 1961.

DOMINICO, Mary. Community Information and Referral Services. Information Services of the Social Planning Council of Metropolitan Toronto, July, 1966.

DRAPER, James A. (ed.) Citizen Participation: Canada. Toronto: New Press 1971.

ENVIRONICS RESEARCH GROUP LIMITED. The Seventh Age. A bibliography of Canadian Sources in Gerontology and Geriatrics, 1964-1972. Prepared for C.M.H.C., September, 1972.

FARIS, Ron, Chairman, Minister's Advisory Committee on Community Colleges. Report of the Minister's Advisory Committee on Community Colleges. Province of Saskatchewan, Department of Continuing Education, August, 1972.

FIELD, Minna. The Aged, The Family and The Community. Columbia University Press, New York – Lond., 1972.

FINNIGAN, B. and GONICK, C. Making It – The Canadian Dream. McLelland and Stewart Limited, 1972.

FREDETTE, Jean-Marc. Population Register – Annual Report 1969-70. Province of Quebec.

GARRETT, Lorna and HILL, Mary. A Study of Community Care for Seniors. SPARC of British Columbia, December, 1972.

GOVERNMENT OF NEW BRUNSWICK. New Brunswick Regulations – 66-65; A Regulation Under Social Welfare Act.

GOVERNMENT OF NEW BRUNSWICK. Annual Report – Department of Social Services (71-72).

GRAY, Robert and MOBERG, David. The Church and the Older Person. William Ferdmans Publishing Co., Grand Rapids, Michigan, 1962.

GREGOR, Doris. A Study of Elderly People in Moose Jaw, Saskatchewan. Someone Still Cares.

GUINAN, Sr. St. Michael. Some Findings in Preparation for Retirement Courses in Toronto District.
On behalf of Ontario Department of Social and Family Services Homes for the Aged – Office on Aging Branch, Toronto. Prepared for the Gerontological Society, Houston, Texas, October 27-30, 1971.

HAVENS, B. and THOMPSON, E. Design for Matching Needs of and Resources for the Elderly in Manitoba. Division of Research, Planning and Program Development, Manitoba Department of Health and Social Development. December 20, 1972.

HAVENS, B. and THOMPSON, E. Field Survey of Need of the Elderly and Resources to Meet Need in Manitoba. Division of Research, Planning and Program Development, Manitoba Department of Health and Social Development. December 20, 1972.

HEAD, Wilson A. Partners in Information. A Study of Community Information Centres in Ontario. September, 1971.

HEALTH AND WELFARE; Department of. Report on the Administration of Old Age Assistance in Canada. March 31, 1970.

HEALTH AND WELFARE; Department of. Listing of Homes for Special Care – March 31, 1972. Hospital Care Statistics Section, Medico-Social Statistics Office, National Health and Welfare, Ottawa, June, 1972.

HELP THE AGED. Granny Come Home. Britain.

HELP THE AGED. The Aged in Britain – 1972. Britain.

HELP THE AGED. Pensions – A Challenge to the Nation. Britain.

HELP THE AGED. Who Should Provide Lifeline Telephones? Britain.

HELP THE AGED. Telephones for the Aged – Life or Death. Britain.

HELP THE AGED. Help the Aged's Good Neighbour Scheme. Britain.

HOLMSTEAD, Hope, Chairman, Executive Committee, Canadian Conference on Aging.

Proceedings. Canadian Conference on Aging, 1966. Published by Conference on Aging, Canadian Welfare Council, Ottawa, Ontario, November, 1966.

HOMSTEAD, Hope. Aging in Canada 1966.

Published by Canadian Welfare Council, Ottawa, Ontario. August, 1966.

INTERDEPARTMENTAL COMMITTEE ON CARE FOR THE AGING. Objectives, Strategy and Programs for Government Involvement in Care For the Aging. Government of New Brunswick, October 10, 1972.

KUBLER-ROSS, Elisabeth. On Death and Dying.
The MacMillan Co., New York, 1969.

LAURENCE, Margaret. The Stone Angel.

LAYCOCK, Dr. Joseph. At Home After 65. Housing and Related Services for the Aging. Canadian Welfare Council, Ottawa, May, 1964.

LEVI, Honourable Norman, Minister of Rehabilitation and Social Improvement, Province of British Columbia. Annual Report of the Department of Rehabilitation and Social Improvement. For the year ended March 31, 1972.

LEVI, Honourable Norman. A New Direction – Now the Community Resources Centre. A position paper presented to Ministers Conference on Needs of the Aging, March 13, 1973.

MCKAY, Moses. Target for Senior Citizens. Task Force on Senior Citizens, Ontario Federation of Labour. Research, writing, editing by Morden Lazarus, Co-operative Press Associates, October, 1973.

MCLEOD, J. T.; Research Associates Ltd. Consumer Participation Regulation of the Professions Decentralization of Health Services. A Report Submitted to the Minister of Public Health, Province of Saskatchewan, August, 1973.

MANITOBA, Department of Health and Social Development. Aging in Manitoba – Needs and Resources. Volume I – Introductory Report. 1971.

MANITOBA, Department of Health and Social Development. A Guide to Care Home Planning Hostels and Personal Care Homes.

MARTIN, Jean-Marie. Policy of Old Age. Government of Quebec, September, 1970.

MILLER, Honourable S. A., Chairman, Cabinet Committee on Health Education and Social Policy, Government of Manitoba. White Paper on Health Policy. July, 1972.

MINISTRY OF SOCIAL AFFAIRS. Policy Relative to Housing of Adults. Quebec, December, 1972.

MORISON, Dr. J. B., Manitoba Department of Health. Nursing Homes. The Canadian Welfare Council, January, 1966.

MORTON, M. (ed.) Developing Services for Older Persons. A report of the American Public Welfare Association, California project. December, 1967.

NADER, R. and BLACKWELL, K. You and Your Pension. Grosman Publishers, New York, 1973.

NATIONAL OLD PEOPLES' WELFARE COUNCIL. Age Concern at Work Annual Report 1971-72. London, England. Published by Age Concern and printed by Green & Co. (Lowestoft) Ltd.

NATIONAL HEALTH AND WELFARE, Dept. of. Committee on Costs of Health Services. Volumes I, II and III.

NOVA SCOTIA CONFERENCE ON AGING. Years of Activity – Days of Leisure. March 12-15, 1967.

ONTARIO LEGISLATIVE ASSEMBLY. Final Recommendations of the Select Committee on Aging. 1967.

ONTARIO. The Ontario Human Rights Code. Revised Statues of Ontario, 1970. Chapter 318. February, 1973.

ONTARIO DEPARTMENT OF SOCIAL AND FAMILY SERVICES. Consider Yourself at Home. March, 1971.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. On Becoming Incorporated – Finding Your Way to the Centre. Homes for the Aged – Office on Aging Branch.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. Directory of Homes for the Aged, Charitable and Municipal Adult Residences Elderly Persons' Centres. Ontario 1972-73.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. Organizing Club Activities With Older People.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. The Charitable Institutions Act and Regulations. July, 1972.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. The Elderly Persons Centres Act and Regulations. June, 1972.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. The Family Benefits. Act and Regulations.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. The Homemakers and Nurses Services Act and Regulations.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES. The Homes for the Aged and Rest Homes Act and Regulations.

ONTARIO WELFARE COUNCIL. Opinions About People. Form A Guidelines and Manual, January, 1971.

ONTARIO WELFARE COUNCIL. Ten Goals for the 1970's For The Senior Citizens of Ontario. January, 1973.

ONTARIO MINISTRY OF COMMUNITY AND SOCIAL SERVICES, Sports and Recreation Branch. Pre-Retirement Resource Kit.

ORRIS, Milton S. Factors Which Contribute to the Social and Economic Independence of People Over 60. Sponsored by the Social Planning Council of Saskatoon & The Saskatoon Senior Citizens Association. 1970.

OSBORNE, John E. Measurement of Poverty. Publication of Department of National Health and Welfare, Canada.

OSTRY, S. and PODOLUK, J. Economic Status of the Aging. Parts I and II. Dominion Bureau of Statistics. Prepared for Canadian Welfare Council's Conference on Aging, Toronto, Ontario, January, 1966.

PEEL COUNTY COMMUNICATIONS STUDY. A Report on Information Services.

PEEL COUNTY COMMUNITY SERVICES. Peel County Quality of Living Study. Volumes I and II. Mississauga, Ontario. October 20, 1972.

PROVINCE OF SASKATCHEWAN. Briefing Book for Federal-Provincial Housing Conference.

PUBLIC HEATLH, Dept. of, Research & Planning Branch, Regina. Saskatchewan Population Statistics. May, 1973.

PUBLIC HEALTH, Dept. of. Index of Hospitals, Special Care Facilities and Home Care Programs.

SMISHEK, Honourable W. and TAYLOR, Honourable A. Policy and Procedures Manual – Community Health and Social Centres. Departments of Public Health & Social Services. September 12, 1972.

SOCIAL PLANNING COUNCIL OF GREATER NIAGARA. Community Services for Older People. September, 1971.

SPIEGEL, Murray R. Schaum's Outline Series Theory and Problems of Statistics. McGraw-Hill Book Co., 1961.

STEWART, Monnica. My Brother's Keeper. Health Horizons Limited, Publishers for The Chest and Heart Association, Tavestock House, North, London, WC1H9JE, 1970.

TASK FORCE ON GOVERNMENT INFORMATION. To Know and Be Known. Volumes I and II. August, 1969.

THE GREATER NIAGARA SENIOR CITIZENS' ASSOCIATION. Proposal for A Study of Problems Relating to Aging in Downtown Niagara. October, 1972.

TORONTO AREA PRESBYTRY OF THE UNITED CHURCH OF CANADA. Senior Citizens Media Research Project. Phase 1, March, 1973.

TOUPIN, Honourable Rene, Minister, Manitoba, Department of Health and Social Development. White Paper on Health Policy, Volumes I and II. November, 1972.

TOWNSEND, Peter. Changing Role of the Older Person in Our Society. Canadian Conference on Aging, 1966.

UNITED COMMUNITY SERVICES OF PETERBOROUGH AND DISTRICT. Senior Citizens' Seminar. June 17, 1972.

WALDHEIM, Kurt, Secretary-General, United Nations Economic and Social Council. The Aged and Social Change – Progress Report of the Secretary.

WALLIS, W. A. and ROBERTS, H. V. Nature of Statistics. The Free Press, New York, 1965.

WELFARE, Dept. of. Report of Committee Established to Examine Criteria Used for Nursing Bed Construction in Saskatchewan. Research & Planning Branch, February, 1970.

WELFARE, Dept. of. Housing and Special-Care Homes Program – Report No. 2. February, 1969.

WHARF, B. and CARTER, N. Planning for the Social Services: Canadian Experiences. Volume 5 in a series of Case Studies in Social Planning by the Canadian Council on Social Development, July, 1972.

WILSON, Lola (ed. & comp.) Training Institute for Directors of Senior Centres. Winnipeg, February & March, 1972. Published by Canadian Council on Social Development. July, 1972.

WOLFENSBERGER, W. and GLENN, L. PASS (Program Analysis of Service Systems. A method for the quantitative evaluation of Human Services. Field Manual and Handbook. National Institute on Mental Retardation, Sponsored by the Canadian Association for the Mentally Retarded. 1973.

ZAY, Nicholas. Income Maintenance For the Aged; from "On Growing Old" Volume II, No. 1 February, 1973. Published by the Canadian Council on Social Development, Ottawa.